

Reference Material for Documentation

Reference Material for Documentation

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3-3000: Reference Material for Documentation

Overview

Introduction

Properly documenting an inspection or investigation is key to writing valid citations. In addition to considering the statutory/regulatory requirements (or Interim Licensing Standards) to arrive at a determination of compliance or noncompliance, a Licensing Program Analyst must also clearly and methodically record all the relevant supporting information he or she used to arrive at that determination.

Use of the principles of documentation when writing citations, as explained in **Chapter 2 Documenting Deficiencies**, will assist the Licensing Program Analyst in performing this essential function.

Properly documenting an inspection or investigation requires an understanding of the necessary forms – as detailed in **Chapter 3 Inspection/Investigation Reports**, and **Chapter 4 Other Forms and Reports** – and when and how to use them.

Finally, in **Chapter 5 Resolving Deficient Practice Citations**, processing a Plan of Correction and clearing deficiencies also requires proper documentation procedures to ensure that licensees, the Department, and the courts have a clear understanding of expected remedies and actions in response to a finding of deficient practice.

Applicability

The reference material in this document is applicable to the following Community Care Licensing programs:

- Adult and Senior Care
- Child Care Licensing, and
- Children's Residential.

Note: Some sections of this document are written for specific programs or facility types. Where this is the case, it is clearly stated in the text.

Part 1

Principles of Documentation

Overview

Contents

Part 1 establishes some basic information and vocabulary utilized in subsequent sections of this document, then explains procedures to be used when documenting facility inspections and investigations.

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Chapter 1

Concepts and Definitions

Overview

Contents

This chapter provides essential information and a summary of the legal aspects involved in the correct documentation of facility inspections and investigations.

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3-3010: Essential Information

Overview

Contents

This section introduces the foundational concepts, definitions and common forms used in facility inspections and investigations.

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3-3011: Concepts

**Role of the
Licensing
Program
Analyst**

During an inspection or complaint investigation, a Licensing Program Analyst (LPA) is required to use knowledge and ability to gather all of the information necessary to determine if a facility is in substantial compliance with the licensing requirements.

**The
importance of
proper
documentation
for citations**

When the information and evidence gathered support a determination of deficient practice, a citation is written using a Facility Evaluation Report (LIC 809) or a Complaint Investigation Report (LIC 9099).

Each report is

- an official written record of the inspection or investigation
 - a legal document, available to the public upon request
 - an account that accurately documents and justifies the determination of the facility's noncompliance with licensing requirements
 - a formal method of providing the licensee with complete information about what was wrong and why the regulation was not met, and
 - a document that allows the licensee to analyze and correct the identified deficient practices or system failures.
-

**Citations must
be valid**

All citations must be valid.

The validity of a cited practice is determined by evaluating

- sources of available evidence
 - types of available evidence
 - extent of deficient practice, and
 - consequences of alleged deficiency.
-

**The principles
of
documentation**

When the collected evidence of a case supports a determination of deficient practice by a preponderance of the evidence, the Licensing Program Analyst is prepared to write a valid citation.

Use the principles of documentation, as detailed in Chapter 2 of this document, to write a citation.

3-3012: Definitions

Purpose	This section provides definitions for common terms used in this document, listed in alphabetical order.
Citation	An official record of noncompliance with licensing requirements which compels the licensee to correct the deficiency and/or face legal or punitive action as a consequence.
Deficiency	A violation of a licensing requirement.
Deficient practice	The actions, errors, or lack of action on the part of the licensee that do not meet or satisfy a licensing requirement.
Deficient practice statement	A written statement incorporated into a citation that documents the evidence of noncompliance with a licensing requirement.
Department	“The Department” is an abbreviated term used in this document to refer to the California Department of Social Services.
Evidence	The observation, interview, or record review data that substantiates the determination of compliance or noncompliance.
Extent of deficient practice	The health and safety risk, prevalence or frequency of a deficient practice.
Fact	An event known to have actually happened; a truth that is known by actual experience or observation.

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3-3012: Definitions, Continued

FAS	Field Automation System, the electronic database system used by licensing staff, which provides digital versions of Department forms, Evaluator Manual documents, statutes and regulations, and a tracking system for managing the regulation of licensed facilities.
Finding	A discrete item of information observed or discovered during an inspection or investigation that describes a practice of the facility relative to a specific requirement.
Identifier	A reference code that identifies an individual in a public document when their name must remain confidential.
Inspection	The on-site process by which a Licensing Program Analyst evaluates licensee compliance with licensing requirements.
Interim Licensing Standards (ILS)	<p>By legislative authority, a set of rules that are issued by the California Department of Social Services as an operational tool to implement a law. These standards will be replaced with Title 22 regulations once written and approved.</p> <p>Note: Currently, Children's Residential Program is the only program making use of ILS.</p>
Interview	<p>An interview is a process which largely consists of communicating with individuals to collect information about a facility's operations and practices. Typically, interview subjects for the Licensing Program Analyst may include, but not be limited to</p> <ul style="list-style-type: none">• persons in care• family members of persons in care• complainants• facility staff• physicians• the ombudsman, and/or• other individuals.

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3-3012: Definitions, Continued

Investigation	The overall process of accumulating evidence and deriving conclusions from that evidence in conjunction with a complaint or appeal.
Key Indicator Tool (KIT)	A Key Indicator Tool (KIT) is a checklist customized to the inspection of a specific facility type. Each KIT is designed to offer a streamlined but reasonable means of assessing compliance. A full comprehensive review is triggered if certain KIT requirements are found to be unmet.
Licensee	The person, firm, partnership, association, corporation, county, city, public agency, or other governmental entity having the authority and responsibility for the operation of a licensed community care facility.
Licensing Program Analyst	<p>A state or county licensing worker responsible for complaints, appeals, licensing, inquiries, and evaluation of community care facilities.</p> <p>Note: The term “Licensing Program Analyst” (LPA) is referred to as “Evaluator” in California Code of Regulations, Title 22, Sections 80001(e)(4), 81001(e)(4), 87101(e)(4), 87801(e)(2), and 101152(e)(3). Distinctions between state and county personnel are specified.</p>
Observation	A process by which a Licensing Program Analyst gathers information based on input obtained from the five senses.
Preponderance of the evidence	The requirement that more than half the evidence in a case supports a particular conclusion.
Record review	A process through which documents are read and analyzed.
Requirement	Any principle or process that is required by law or regulation as a condition of licensure.

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3-3012: Definitions, Continued

Substantial compliance	The absence of any deficiencies which would threaten the physical health, mental health, safety or welfare of the persons in care at a licensed facility.
Substantiated complaint	An allegation that is considered valid because the preponderance of the evidence standard has been met.
Technical assistance	A term used by the Department to categorize constructive information or best practice which may or may not be tied to a specific statute, regulation, or other licensing requirement.
Technical violation	A term used by the Department to categorize a violation of licensing requirements which does not pose a health, safety or personal rights risk to a person in care. Technical violations are documented, but are not cited.
Type A violation	A term used by the Department to categorize a violation of licensing requirements which poses an immediate health, safety or personal rights risk to a person in care.
Type B violation	A term used by the Department to categorize a violation of licensing requirements which poses a potential health, safety or personal rights risk to a person in care.
Unfounded complaint	An allegation that is considered invalid because the evidence shows it could not have happened, is false, and/or is without a reasonable basis.
Universe	The total number of individuals, records, observations, or objects related to an instance of deficient practice, and used as the denominator when determining the extent of deficient practice.
Unsubstantiated complaint	An allegation that lacks a preponderance of the evidence to prove that the violation occurred.

3-3013: Common Forms

Purpose	This section lists California Department of Social Services forms referenced in this document, arranged in numerical order by form code.
Deficiency/ Penalty Review (LIC 178)	A form that can be used to notify a licensee of the status of one or more cited deficiencies, assessed penalties, appeals or due date extension requests.
Contact Sheet (LIC 185)	A form for documenting the efforts of licensing staff to contact a particular facility, or for documenting contact from a licensee.
Facility Evaluation Report (LIC 809)	The official public document that is a written record of a non-complaint related facility inspection. The electronic version of the LIC 809 form includes the LIC 809C for narrative overflow and the LIC 809D for writing up citations of Type A and Type B violations.
Confidential Names (LIC 811)	The confidential form used to record the actual names of persons in care for whom an identifier reference has been used in publicly available documentation.
Detail Support Information (LIC 812)	A form used for recording confidential or supplemental details of an inspection or investigation.
Photography Report (LIC 813)	A form used for identifying photographs included as documentation.
Declaration (LIC 855)	A form for recording a testimonial statement from an adult witness.

Continued on next page

3-3013: Common Forms, Continued

Children's Record Review (LIC 857)	A form used for recording details found in the records of a Child Care facility.
Client/Resident Records Review (LIC 858)	A form used for recording details found in the records of an Adult, Senior Care, or a Children's Residential facility.
Review of Staff/Volunteer Records (LIC 859)	A form used for recording a review of a facility's staff and volunteer records, including a summary of individual employee records which shows positive and negative details of each employee's service at the facility.
Proof of Correction (LIC 9098)	A form used by a facility licensee or administrator to certify under penalty of perjury that one or more deficiencies have been corrected.
Complaint Investigation Report (LIC 9099)	The official public document that is a written record of a complaint investigation. The electronic version of the LIC 9099 form includes the LIC 9099C for narrative overflow and the LIC 9099D for writing up citations of complaint-related Type A and Type B violations.
Advisory Notes – Technical Violation (LIC 9102TV)	<p>A form used to document a technical violation.</p> <p>Note: When providing technical assistance that is not tied to a technical violation (such as best practices), Advisory Notes – Technical Assistance (LIC 9102TA) must be used, instead.</p>
Advisory Notes – Technical Assistance (LIC 9102TA)	<p>A form used to provide written technical assistance to a licensee, when that assistance is not in connection with a technical violation.</p> <p>Note: When documenting a technical violation, Advisory Notes – Technical Violation (LIC 9102TV) must be used, instead.</p>

3-3050: Legal Aspects of Inspection Documents

Overview

Contents

This section specifies the legal aspects of inspecting facilities and highlights the importance of licensing reports in the decision-making and appeals process.

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3-3051: Legal Aspects of Inspection Documents

The legal role of documentation

An important part of any legal proceeding following an inspection or investigation is the quality of documented evidence provided by the Licensing Program Analyst (LPA).

A legal outcome can frequently depend upon how well the LPA has

- performed the inspection or investigation
 - documented evidence and sources in the case, and
 - recorded observations, interviews, and record reviews supporting the analyst's findings.
-

The legal role of the Licensing Program Analyst

To ensure the legal viability of a citation, the Licensing Program Analyst must

- record all facts and findings of the licensee's compliance deficiencies, and
 - provide consistent and accurate records of the facts and findings at all times.
-

Confidential documents

Important! The Licensing Program Analyst should always be aware that documents filed as confidential may be made public (sometimes with necessary redaction) by

- action of an administrative law judge, or
- as a result of a Public Records Act request.

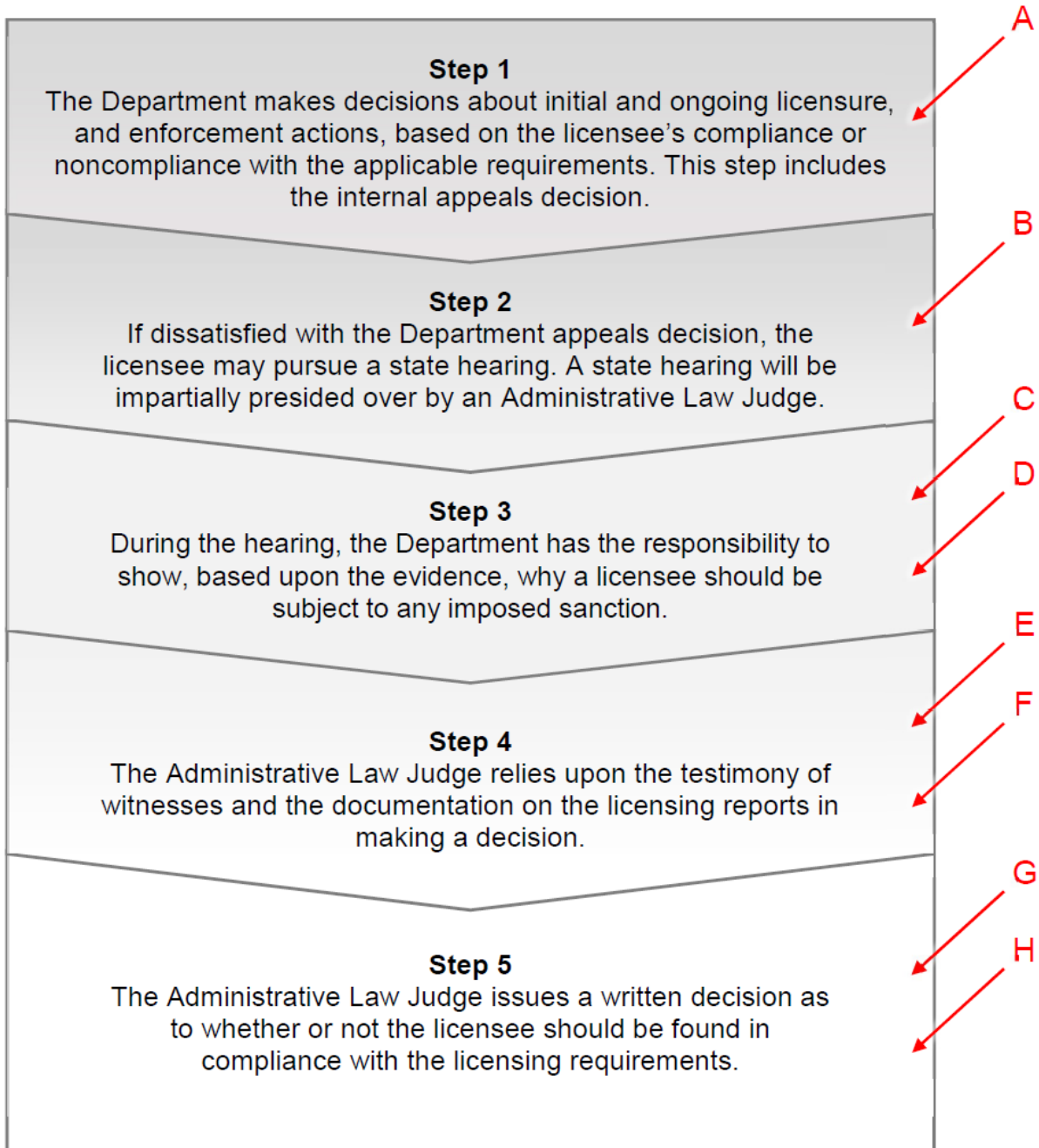
All documents, both public **and** confidential, must be prepared with accuracy, clarity and appropriate use of narrative language, documentary facts, and sensitive information in mind.

Continued on next page

3-3051: Legal Aspects of Inspection Documents, Continued

The legal process

The graphic below illustrates a brief overview of the legal process of citation enforcement, hearings and appeals, and highlights why proper documentation is such an important contributor to legal outcomes.



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3-3051: Legal Aspects of Inspection Documents, Continued

Notes: the legal process

The table below describes aspects highlighted in the previous graphic.

Item	Notes
A	The Department's licensing decisions are based upon the documentation of the inspections on the Facility Evaluation Report (LIC 809), Complaint Investigation Report (LIC 9099), and other documentation created to support a citation.
B	Hearings are legal proceedings during which witnesses testify both for the licensee and for the Department. Witnesses are subject to cross-examination.
C	The evidence must show the underlying factual reason, basis or rationale for the findings of noncompliance with statutory/regulatory requirements (or Interim Licensing Standards).
D	The Department's primary evidence is the information contained in the Facility Evaluation Report (LIC 809), Complaint Investigation Report (LIC 9099), and any other documentation used to make a determination in the inspection or investigation.
E	All documentation used at a hearing becomes part of the public record.
F	The findings must always be presented in plain language. Documentation should not contain technical jargon, abbreviations or acronyms that would not be easily understood by a layperson.
G	The decision is based on all evidence written by the Licensing Program Analyst during the investigation and by testimony from the administrative hearing.
H	The documentation remains the key element in the record to support the Department's decision regarding noncompliance with the requirements throughout the legal process.

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3-3051: Legal Aspects of Inspection Documents, Continued

Four things to remember

The list below highlights four things a Licensing Program Analyst (LPA) should keep in mind when documenting a citation.

1. The Department of Social Services uses the Facility Evaluation Report (LIC 809), Complaint Investigation Report (LIC 9099), and other supporting forms to defend the Department's decision before the public, during the appeals process, or in court.
 2. It should be assumed in every inspection or investigation that the documentation is subject to close scrutiny.
 3. The Department's decision of noncompliance must be based on objective, factual observations and information, and not on vague conclusions, assumptions, or personal opinion.
 4. A judge will often rely on the LPA's judgment as expressed through the documented evidence presented in the associated licensing reports.
-

Ensuring better outcomes

When writing citations, the Licensing Program Analyst must always

- make certain the cited deficiencies relate to the referenced statutory/regulatory requirements (or Interim Licensing Standard), and
 - write clear and comprehensive documentation that provides the licensee the necessary information to analyze problems, define appropriate corrective action, write an effective plan of correction, and come into compliance with requirements.
-

Chapter 2

Documenting Deficiencies

Overview

Contents

There are **four principles** to keep in mind when documenting deficiencies. This section will examine each of those principles and provide examples for Licensing Program Analysts to apply them in practice.

The four principles covered in this chapter include

- procedures that must be followed, both when a facility is found to be in compliance with requirements, and when a facility is found to be noncompliant
- the use of plain language when writing a citation to help ensure the understanding and proper correction of cited deficiencies by licensees
- the necessary components and methodologies used to write a well constructed citation, and
- a citable deficiency must be documented even when the licensee corrects the deficiency while the Licensing Program Analyst is on-site during the inspection.

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3-3100: Compliance and Noncompliance

Overview

Contents

This section provides an overview of how a Licensing Program Analyst should respond when a facility is found to be in compliance with licensing requirements, and when it is found noncompliant.

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3-3101: Compliance and Noncompliance

Compliance When a licensee complies with the requirements applicable to the licensing inspection/investigation conducted, the Facility Evaluation Report (LIC 809) or the Complaint Investigation Report (LIC 9099) should consist of an explicit statement that the facility is in compliance:
“There were no deficiencies cited at this time.”

Noncompliance If there is noncompliance with one or more applicable requirements, the Facility Evaluation Report (LIC 809) or the Complaint Investigation Report (LIC 9099) must include corresponding deficiencies of noncompliance.

Forms to use The Facility Evaluation Report (LIC 809) and Complaint Investigation Report (LIC 9099) are the official documents that communicate the determination of noncompliance with licensing requirements.
Important! When a Licensing Program Analyst writes a citation using either form, they are creating an **official** record that is available to the public upon request.

3-3140: Using Plain Language

Overview

Contents

This section will explain the importance of using plain language when writing a deficiency report.

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3-3141: Using Plain Language	21

3-3141: Using Plain Language

What to include in the citation

The Licensing Program Analyst (LPA) must only include evidence in the Facility Evaluation Report (LIC 809) and Complaint Investigation Report (LIC 9099) that indicates the licensee is not in compliance.

The following table shows what to include and what to avoid when writing a deficiency citation.

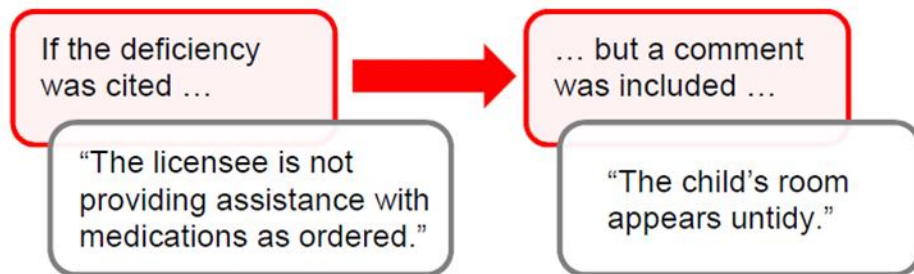
The LPA must include ...	The LPA must not include ...
<ul style="list-style-type: none"> • only the evidence to support the determination of noncompliance • writing that is <ul style="list-style-type: none"> ○ clear ○ objective, and ○ easily understood. 	<ul style="list-style-type: none"> • best practice declarations • personal opinions • advice • comments, or • assumptions.

Avoid extraneous remarks

The Licensing Program Analyst must not include extraneous remarks in a written deficiency citation that might confuse readers or appear to bias the citation report's conclusions.

Example: extraneous remarks

The diagram below depicts an example of an extraneous remark.



Explanation: The untidy room may be factual, but it has no relevance to the deficient practice regarding the medications and would only confuse the reader.

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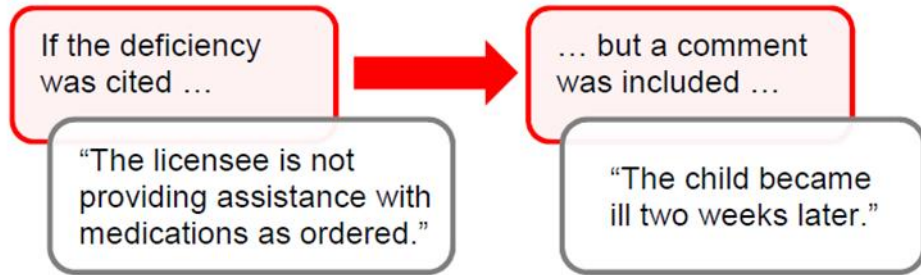
3-3141: Using Plain Language, Continued

Avoid cause-and-effect conclusions

The Licensing Program Analyst does not have the authority to make **cause-and-effect conclusions**.

Example: cause-and-effect conclusions

The diagram below depicts an example of a cause-and-effect conclusion:



Explanation: The person in care being ill is factual, but it cannot be assumed that they were ill due to the wrong dose of medication. It could have happened because of other extenuating circumstances.

Write clearly

The language that the Licensing Program Analyst (LPA) uses to cite a deficiency must be clear. LPAs must not use slang, unfamiliar terms and phrases, or unidentified acronyms.

Use active voice when writing

Licensing Program Analysts (LPAs) should always write using the active, rather than passive, voice.

The table below contrasts the active and passive voices.

Writing Style	Examples
Active voice	<p>“On April 3, 2018, the Department received the police report from the Sacramento Police Department.”</p> <p>Note: This statement is clear and complete.</p>
Passive voice	<p>“The police report was received.”</p> <p>Note: This statement does not make clear who submitted the report, who received it, and when it was received.</p>

Continued on next page

3-3141: Using Plain Language, Continued

Citation writing: things to remember

The table below lists some things to remember – and to avoid – when writing a deficiency citation, as well as examples of correct formatting.

Things to Remember	Things to Avoid	Correct Examples
Write to inform.	Do not write to impress.	“On 10/11/17, the Department issued a citation against the facility.”
Write using active voice.	Do not write using passive voice.	
Use capital letters with proper names/titles.		<ul style="list-style-type: none"> • “Resident #3” • “Child 1” • “Administrator”
State time as regular clock time, and use a.m. or p.m. consistently.	Do not use military or 24-hour clock time.	<ul style="list-style-type: none"> • “9:35 a.m.” • “12:18 p.m.”
Use numbers to designate dates.	Do not use the names of days or months.	“01/02/01”
Refer to information by the date it was performed and entered in the record.	Do not refer to information by the date the file was reviewed.	“immunization performed on 08/12/09”
Include the dates interviews were conducted and the data entry date of information entered into the record when it is critical to the explanation of the deficient practice.	Do not omit dates when they are important to support the findings.	<ul style="list-style-type: none"> • “physician’s note dated 06/22/15” • “Health Home Aide visit dated 12/02/16” • “interview conducted 07/02/17”
Spell out each word or phrase, and include an abbreviation in parentheses the first time it is used in each citation.	Do not use undefined abbreviations, initials, or technical jargon.	<ul style="list-style-type: none"> • “Child Care Center (CCC)” • “Social Rehabilitation Facility (SRF)”
Use generic terms for medications if possible. If the medication name is used, describe its purpose.		<ul style="list-style-type: none"> • “Lisinopril (high blood pressure medication)” • “aspirin”

Continued on next page

3-3141: Using Plain Language, Continued

Citation writing: things to avoid

The table below lists some examples of things to avoid when writing a citation.

Things to Avoid	Examples
Do not use vague terminology.	<ul style="list-style-type: none">• “seems”• “appears”• “did not”• “always”
Do not use words that imply or state conclusions without including the facts to support them.	<ul style="list-style-type: none">• “only”• “just”• “unsatisfactory”• “unnecessary”• “inadequate”
Do not describe specific conditions that can identify particular persons in care.	<ul style="list-style-type: none">• “amputation of Resident #1’s lower left leg”• “a noticeable permanent scar on the child’s forehead”

Writing tips

Generally, when writing a deficiency, the Licensing Program Analyst should

- put the most significant example first
- put all relevant facts in a chronological order
- organize findings in a logical sequence
- use correct grammar
- keep sentences short and use simple sentence structure
- write in non-technical layman’s terms so that the licensee, public, persons in care, family members, and the Administrative Law Judge will understand
- write each deficiency as a stand-alone item, with all relevant information and facts for that deficiency included in the description
- write to an eighth-grade level to ensure clarity, and
- only quote information if it is exact and accurate; if an abbreviation is used in the quote, explain what it is in parentheses after the quote.

3-3150: Components of a Citation

Overview

Contents

This section will explain the components of a citation, and their attributes and functions.

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3-3151: Basic Components and Writing Rules

Components of a citation

A citation always consists of three main components:

- (A) relevant facts/findings
- (B) a statutory/regulatory reference (or Interim Licensing Standard), and
- (C) a deficient practice statement.

Attributes of the components

The table below describes the components of a citation for deficient practice.

Component	Attributes
(A) Relevant facts and findings	The findings are relevant to the deficient practice statement, and support the determination of the licensee's noncompliance with the requirement.
(B) Statutory/regulatory reference	<p>The statutory/regulatory reference includes</p> <ul style="list-style-type: none"> • the applicable statutory/regulatory reference: <ul style="list-style-type: none"> ◦ Health and Safety Code ◦ California Code of Regulations, Title 22, or ◦ Interim Licensing Standards (ILS) • the language from the statutory/regulatory reference (or ILS) which specifies the requirement with which the licensee was noncompliant, and • an explicit statement that the requirement was "not met."
(C) Deficient practice statement	<p>The deficient practice statement includes</p> <ul style="list-style-type: none"> • the sources of the information through which the evidence was obtained • a brief (1-2 sentence) statement that summarizes the action or lack of action by the licensee that resulted in noncompliance with the referenced statute, regulation or Interim Licensing Standard (ILS) • a description of the extent of the deficient practice (the number of deficient cases relative to the total number of such cases) • the identifiers of individuals referenced in the extent of the deficient practice, and • the level of risk (Type A "immediate health, safety or personal rights impact" or Type B "potential health, safety or personal rights impact") presented by the deficiency.

Continued on next page

3-3151: Basic Components and Writing Rules, Continued

**Avoid
concluding
remarks**

All relevant information demonstrating noncompliance should be provided in the citation. Avoid conclusion or summary remarks at the end of a citation.

3-3152: Relevant Facts and Findings

What are the findings?

The **findings** support the deficient practice statement with specific and detailed information. The findings must

- describe the who, what, when, where and how of a citation narrative
 - be presented in a concise and logical sequence
 - include the descriptions of actions, situations, identifiers, and sources previously mentioned in the citation, and
 - illustrate the licensee's noncompliance for each issue referenced in the deficient practice statement.
-

What is a fact?

A **fact** is an actual occurrence; something known to exist or to have happened.

The findings are always facts

For the purposes of Reference Material for Documentation, the findings of a case are always facts. They must always

- support the deficient practice statement
 - exclude opinion, guesswork, or advice, and
 - allow the licensee to straightforwardly compare what they did or did not do, against what was required.
-

Why should only facts be used?

It is important that the findings only consist of facts pertinent to a deficiency that has been described in the deficient practice statement. This is because

- failure to include **pertinent facts** may prevent the licensee from discovering what contributed to the deficient practice, and
 - without the presence of facts, the evidence can be construed to mean that an assumption was made, rather than representing a known conclusion about the facility's practice.
-

Pertinent facts

Identification of the pertinent facts gives the licensee the means to examine the noncompliance with requirements in light of the specific circumstances or contexts in which the failure occurred.

Only **pertinent** facts (facts that directly support the determination made in the deficient practice statement) should be used.

Continued on next page

3-3152: Relevant Facts and Findings, Continued

When is a fact not considered pertinent?

In some situations, facts may exist that do not effectively support the determination made in the deficient practice statement. These facts should not be included in the findings, since they are not pertinent facts.

Example: While inspecting a Residential Care Facility for the Elderly, the Licensing Program Analyst (LPA) discovers that a resident has not received a needed treatment. Reasons that this fact might not support a determination of noncompliance include

- the resident refused the treatment, or
- trained staff was not available at the appointed time to provide the treatment (but the treatment was provided later in the day).

These sorts of facts might support situational anomalies, rather than deficient practice.

Note: Each case is unique, and it is up to the LPA to evaluate each situation based upon the evidence.

The findings: the five questions

When assembling the findings, try to answer the **five questions** regarding each piece of evidence included in the narrative of the deficient practice statement:

- **Who** were the persons in care or staff involved?
 - **What** practice was deficient?
 - **When** (and for how long) did the problem occur? What were the number and duration of the observations? What were the specific dates or time period for the noncompliance?
 - **Where** did the deficient practice occur? Did the deficiency involve locations or documents?
 - **How** was the deficiency determined? How does the determination relate to the requirement?
-

Applying the five questions

Based on the nature of the deficiency, it may be impossible or inappropriate to provide an answer for each of the **five questions** in every situation. However, using the five questions approach in assembling the findings will make inclusion of all the pertinent facts easier to achieve for the Licensing Program Analyst.

Continued on next page

3-3152: Relevant Facts and Findings, Continued

Organizing facts

In addition to using the five questions to help uncover facts that should be included in the findings, some other techniques are useful for organizing and presenting the findings of a case.

When writing a citation, the findings should be

- organized in a sequential and logical order, and
- grouped together based upon each source of evidence included in the deficient practice statement.

Example 1: organizing facts

The table below illustrates the ordering and grouping of facts in the findings.

Example Findings	Notes
<ul style="list-style-type: none"> • Five records of residents with dementia were reviewed with the Administrator on 9/2/16 at 1:15 p.m. • Resident #3's last medical reappraisal was done on 5/14/15. • Resident #5's last medical reappraisal was done on 4/2/15. • The Administrator verified that the medical reappraisal dates for Residents #3 and #5 were the most current. 	<ul style="list-style-type: none"> • These findings are written in chronological order, beginning with time and date of record review, and listing each reviewed item in sequence. Administrator verification of facts is listed as it actually occurred, after the facts in the reviewed records. • For each item mentioned, all related facts about that item are grouped together in the presentation. • For each item in the findings, the five questions of who, what, when, where and how are answered, as applicable.

Continued on next page

3-3152: Relevant Facts and Findings, Continued

**Example 2:
organizing
facts**

The table below illustrates the ordering and grouping of facts in the findings.

Example Findings	Notes
<ul style="list-style-type: none">• The records of 13 children were reviewed with the facility representative on 10/12/17 at 9:45 a.m.• The records showed that 2 of the 13 children (Child #3 and Child #12) had special dietary requirements due to allergies.• On 10/13/17, from 12:01 to 12:33 p.m., Child #3 and Child #12 were observed being served the same meals as the other children, rather than meals suited to their dietary requirements.	<ul style="list-style-type: none">• The findings are written sequentially, in order of occurrence:• the record review• the discovery of pertinent facts in the records, and• the related observation on the following day.• The arrangement of facts makes an easy-to-follow narrative, with details grouped together into clusters of connected information.

3-3153: Findings and Sources

Findings and sources

The findings of an investigation describe the specifics of the ***sources*** of evidence. Each finding will detail the who, what, when, where or how of each source.

Important! All sources identified in the deficient practice statement must also be represented in the findings.

Types of sources

Acquiring sources of evidence involves the collection of information in accordance with the requirements. A source can be one of three types, as shown in the table below.

Source Type	Definition
Observation	A process by which a Licensing Program Analyst gathers information based on input obtained from the five senses.
Interview	A process of collecting information about a facility's operational practices by talking to <ul style="list-style-type: none">• persons in care• family members of persons in care• complainants• facility staff• physicians• the ombudsman, and/or• other individuals.
Record review	A process through which documents are read and analyzed.

Continued on next page

3-3153: Findings and Sources, Continued

Observation

Observation is often the primary method used during a facility inspection to document evidence of deficient practice. It will consist of what the Licensing Program Analyst may

- see
- hear
- touch
- smell, and/or
- taste.

Note: Observation is used to answer the who, what, where, when, and how questions of the case.

Use of observation

When making observations, the Licensing Program Analyst must note the specific date and time the observations were made and describe the location. Detailed documentation of observations assists the licensee in identifying when and where the deficient practice occurred.

Note: Time can also include the frequency with which the deficient practice was observed and, as appropriate, the duration of each observation.

Example: observation

The following graphic shows the use of observation to discover compliance shortcomings or deficient practice.



Observation: things to avoid

When documenting observations, it is important to avoid terms that are vague or too general. The table below gives some examples.

Precise	Too Vague
"At 3:05 p.m. on June 17, 2017"	"throughout the inspection"
"From 10:15 a.m. until 10:33 a.m. on March 12, 2016"	"during observation on the second day of the inspection"

Continued on next page

3-3153: Findings and Sources, Continued

Observation and record review

A Licensing Program Analyst may sometimes find it helpful to cross-reference sources of evidence for **observation** and **record review**. This can reveal if actions or outcomes described in facility records are actually occurring in the daily operation of the facility.

Example: Review of a child's record at a facility shows a requirement for a restricted diet due to allergies, but observation shows that the child is repeatedly served the same food as the other children without special dietary restrictions. It is likely that a pattern of deficient practice has been revealed, which should now be investigated more closely.

Interview

An interview is a process which largely consists of communicating with individuals to collect information about a facility's operations and practices. Typically, interview subjects for the Licensing Program Analyst may include, but are not limited to

- persons in care
- family members of persons in care
- complainants
- facility staff
- physicians
- the ombudsman, and/or
- other individuals.

Note: Information obtained through interviews can provide evidence to support or invalidate a deficiency.

Use of interviews

Interviews can be used in a number of ways to provide evidence in an investigation. For example, a Licensing Program analyst might

- talk with persons in care (or their families) to determine if the facility fulfills the commitments it has made in the service/care plan, or
 - interview staff to determine their knowledge of the needs of the person in care and of the facility's policies and procedures.
-

Continued on next page

3-3153: Findings and Sources, Continued

Verification of source evidence

Important! To the greatest extent possible, the Licensing Program Analyst must try to verify the information obtained from interviews, observations, and record reviews.

In the absence of other objective validation of information, information may sometimes be verified through multiple interview sources. Interviewees may corroborate times, dates, and narrative details. Remember to also include the times and dates individual interviews were conducted.

Record review

Record review is the process through which documents are read and analyzed. These may include the facility file, onsite records, records of persons in care, and other printed or written material pertinent to an investigation.

Use of record review

Evidence discovered during record review should be

- discussed with the licensee or staff to clarify information
- used to determine if additional documentation exists, and
- used to strengthen evidence obtained from observations or interviews.

Record review in practice

When using information obtained through record review, there are some essential procedures for the Licensing Program Analyst (LPA) to keep in mind. Some items to remember are:

- For efficiency, it is best to request records from the staff member who should know where the records needed for the inspection can be found.
- Always be specific when identifying a record that contained information used as evidence.
 - **Example:** “Medical record of March 2017 for Client #3”.
- Always include the date of specific evidence sources when such information is critical to the explanation of the deficient practice.
 - **Example:** “Physician’s note dated 4/5/03 ...”
- When regulations, statutes or Interim Licensing Standards require an operating policy on specific issues, the LPA must be certain that the facility’s policy actually fails to meet the requirement(s) before citing the facility as deficient.

Continued on next page

3-3153: Findings and Sources, Continued

Common findings details

Each type of source evidence will frequently be supported by certain types of details in the findings. Commonly used details associated with each type of source evidence are shown in the table below.

Source Type	Associated Findings Details
Observations	Date, time, and location
Interviews	Date, time, and identifiers
Record review	Record type, date, and identifiers

Example: the findings

The graphic below shows the findings of an inspection described on a Facility Evaluation Report (LIC 809).

8	in each room and the residents state that lighting is fine in their rooms. There are grab bars for each toilet and bathtub.
9	Bathtub has a non-skid mat.
10	
11	Five records of residents with dementia were reviewed with the Administrator on 6/26/17 at 1:15 pm. Resident #3's last
12	medical appraisal was done on 5/14/15. Resident #5's last medical appraisal was done on 4/2/15. The Administrator verified
13	that the medical appraisals dates for Residents #3 and #5 were the most current.
14	
15	
16	
17	

relevant facts / findings

Example notes: the findings

The *findings* graphic shows the use of findings, tied to sources mentioned in the deficiency statement of a citation. This is magnified in the table below.

Findings (supporting specifics)	Deficient Practice Statement
"Five records of residents with dementia were reviewed with the Administrator on 6/26/17 at 1:15 p.m. Resident #3's last medical appraisal was done on 5/14/15. Resident #5's last medical appraisal was done on 4/2/15. The Administrator verified that the medical appraisals dates for Residents #3 and #5 were the most current."	"The licensee did not ensure that annual medical reappraisals were done for 2 of 5 residents (Resident #3 and #5) with dementia."

Continued on next page

3-3153: Findings and Sources, Continued

Connecting the findings to the deficiency

Any source of evidence used in a deficient practice statement must always be referenced and supported in the findings. The Licensing Program Analyst should remember the following points:

- Sources included in the deficient practice statement **must** also be found in the findings.
- Identifiers used in the deficient practice statement **must** correlate with those used in the findings.
- Information that both supports a finding and affects the deficiency determination should **never** be omitted from the deficient practice statement.

Example 1: connecting the findings to the deficiency

The table below provides an example of how findings must support the sources in the deficient practice statement.

In the deficient practice statement ...	In the findings ...
sources are discussed that indicate a deficiency involving Resident #3 and Resident #5.	facts are given that directly support the deficiency involving Resident #3 and Resident #5.
the identifiers “Resident #3” and “Resident #5” are used to reference these two individuals.	the same identifiers “Resident #3” and “Resident #5” are employed to reference the same two individuals.
information is included that medical reappraisals were not performed as required, which indicates a determination that a potential health risk to residents exists.	the specific facts discovered during review of facility records concerning the timing of medical reappraisals are described.

Continued on next page

3-3153: Findings and Sources, Continued

**Example 2:
connecting the
findings to the
deficiency**

The table below provides an example of how findings must support the sources in the deficient practice statement.

In the deficient practice statement ...	In the findings ...
the identifier "Child #4" is used to reference this particular child in care.	the same identifier (Child #4) is used to reference this specific child.
it is established that Child #4 was left unsupervised for 20 minutes while staff chatted in another room.	facts are given that directly support the deficiency of Child #4 being left unsupervised.
it is documented that, according to facility records, employees have been disciplined in the past for failing to keep children under supervision.	each instance found in facility records of staff being disciplined for failing to keep children under supervision is described.

3-3154: Statutory/Regulatory Reference

What is a statutory/regulatory reference?

A statutory/regulatory reference identifies the requirements in which the facility has been found deficient. It is composed of two elements:

- the specific statutory/regulatory reference of the Health and Safety Code, California Code of Regulations, or Interim Licensing Standard, including the applicable language from that reference, and
- an explicit statement that the requirement was “not met.”

Example: statutory/regulatory reference

The graphic below shows the statutory/regulatory reference for a cited deficiency on a Facility Evaluation Report deficiencies page (LIC 809D).

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066	
FACILITY EVALUATION REPORT (Cont)			
FACILITY NAME: SHADY ACRES SENIOR HOME		FACILITY NUMBER: 193600132	
DEFICIENCY INFORMATION FOR THIS PAGE:		VISIT DATE: 06/17/2017	
Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type B 07/17/2017 Section Cited CCR 87705(c)(5)	1 87705 Care of Persons with Dementia (c) (5) 2 Each resident with dementia shall have an annual 3 medical assessment as specified in Section 4 87458, Medical Assessment, and a reappraisal 5 done at least annually, both of which shall include 6 a reassessment of the resident's dementia care 7 needs. This requirement not met as evidenced by: 8 Based on interview and record review, licensee 9 failed to ensure that annual medical reappraisals	1 2 3 4 5 6 7 8 9 <div style="color: red; font-weight: bold; margin-top: 10px;">statutory / regulatory reference</div>	

Example notes: statutory/regulatory reference

In the *statutory/regulatory reference* graphic, the specific section of the licensing requirements in which the facility was found noncompliant is identified and the relevant subsection quoted.

The statutory/regulatory reference is concluded with the statement that the requirement was “not met”.

Important! This quote must fit in the space provided on the form, allowing the licensee to understand and effectively respond to the cited deficiency. Therefore, the Licensing Program Analyst must be mindful of space limitations while also ensuring that all relevant language from the quoted statute, regulation, or Interim Licensing Standard is included.

3-3155: Deficient Practice Statement

What is a deficient practice statement?

A deficient practice statement describes the deficiency for which the citation is being written. It is positioned after the statutory/regulatory reference and includes five elements:

- (A) Reference to the source or sources of the information through which the evidence was obtained.
- (B) The specific actions, errors, or lack of action relative to the regulation.
- (C) A description of the extent of the deficient practice or the number of deficient cases relative to the total number of such cases.
- (D) The code or "identifier" of each individual referenced in the extent of deficient practice.
- (E) The level of risk attached to the situation.

Example: statement of deficient practice

The graphic below shows the deficient practice statement for a citation on a Facility Evaluation Report deficiencies page (LIC 809D). It is written below the corresponding statutory/regulatory reference.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066	
FACILITY EVALUATION REPORT (Cont)			
FACILITY NAME: SHADY ACRES SENIOR HOME		FACILITY NUMBER: 193600132	
DEFICIENCY INFORMATION FOR THIS PAGE:		VISIT DATE: 06/17/2017	
Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type B 07/17/2017 Section Cited CCR 87705(c)(5)	1 87705 Care of Persons with Dementia (c) (5) 2 Each resident with dementia shall have an annual 3 medical assessment as specified in Section 4 87458, Medical Assessment, and a reappraisal 5 done at least annually, both of which shall include 6 a reassessment of the resident's dementia care 7 needs. This requirement not met as evidenced by: 8 Based on interview and record review, licensee 9 failed to ensure that annual medical reappraisals 10 were done for 2 of 5 residents (Residents #3 and 11 #5) with dementia which poses a potential Health 12 risk to residents in care. 13 14	1 2 3 4 5 6 7 8 9 10 11 12 13 14 1 2 3	

deficient practice statement

A → B → C → D → E

Continued on next page

3-3155: Deficient Practice Statement, Continued

**Example notes:
deficient practice statement**

The table below magnifies the text highlighted in the *deficient practice statement* graphic.

Item	Description	Example
A	Reference to the source or sources of information through which the evidence was obtained.	"Based on interview and record review"
B	The specific action, error, or lack of action relative to the regulation.	"the licensee did not ensure that annual medical reappraisals were done"
C	A description of the extent of deficient practice, or the number of deficient cases relative to the total number of such cases.	"for 2 of 5 residents with dementia"
D	The identifiers of individuals referenced in the extent of deficient practice.	"Residents #3 and #5"
E	Identification of the level of risk represented by the deficient practice (see "Determining the level of risk").	"which poses a potential health risk to residents in care"

Determining the level of risk

Each level of risk represents a statutory/regulatory (or Interim Licensing Standard) violation. The risk level of a deficiency can be determined using the facts of the case and the chart below.

Risk level	Attributes
Type A	Poses an immediate health, safety, or personal rights risk to a person in care.
Type B	Poses a potential health, safety, or personal rights risk to a person in care.
Technical violation	Does not pose a health, safety, or personal rights risk to a person in care. Technical violations are documented, but not cited.

Continued on next page

3-3155: Deficient Practice Statement, Continued

Writing the deficient practice statement

When writing a deficient practice statement, a Licensing Program Analyst should follow three basic steps, as shown in the table below.

Step	Action
1	Accumulate evidence of the deficiency. If possible, utilize more than one source of evidence. Note: Direct observation is often the strongest source of evidence.
2	As the citation is composed, identify each of the sources of the supporting evidence.
3	For each item of evidence, describe the manner through which the evidence was obtained – from observation, interview, or record review.

Writing guidelines

The deficient practice statement must

- be organized in a logical manner
- state what the licensee did or did not do
- clearly tell the reader why the licensee is being cited
- not simply repeat the wording of the licensing requirement
- reflect the licensing requirement under which it is written, and
- relate to each part of the licensing requirement with which the licensee did not comply.

Important! The deficient practice statement must be written in terms clear enough to allow a reasonably knowledgeable person to understand the specifics of the case in regards to any requirement that is not met.

Justification of cited violations

When writing a deficient practice statement, the Licensing Program Analyst must, for each cited deficiency, show how the level of violation cited (Type A or B) was determined. This can be accomplished by

- clearly documenting the circumstances in the narrative, and relating them to the language of the licensing requirement
- explicitly addressing the risk level (immediate or potential) to persons in care, and choosing the corresponding violation type (A or B), and
- ensuring that the licensing requirement selected is appropriate to the deficiency cited and supported by the evidence and the findings.

Continued on next page

3-3155: Deficient Practice Statement, Continued

Justification of technical violations

When the Licensing Program Analyst documents a technical violation, it is also important to justify why a citation was not written for the deficiency. This can be done by

- clearly documenting the circumstances, incorporating all relevant facts and findings, and
- showing that, while a correction may be advisable, the facts do not currently support a determination that a risk exists to persons in care.

Extent of deficient practice

The extent of deficient practice relates to the prevalence or frequency of a particular practice. The extent of deficient practice will depend upon two factors:

- Does the regulation relate to **all** persons in care served by the licensee?
- Does the regulation relate only to a **subset** of all persons in care served by the licensee (or of applicable situations or cases)?

Showing extent as a ratio

The extent of deficient practice is expressed in a numerical format by identifying the number of **deficient cases** within the **universe** of similar cases or items at a facility.

Some examples are shown in the table below.

Extent of Practice	Notes
There are 6 infant rooms; 2 of the 6 infant rooms did not have required napping equipment.	The universe (all rooms) is 6. The deficient practice is found in 2 cases. The extent is therefore 2 of 6 .
There are 3 residents on special diets; 2 of the 3 residents did not receive their special diets as ordered.	The universe (all residents on special diets) is 3. The deficient practice is found in 2 cases. The extent is therefore 2 of 3 .

Severity of a deficient practice

The severity of a deficiency should also be considered when determining the risk level of a violation.

Example: During an inspection, a Licensing Program Analyst notices cracked tiles in a facility's shower. Depending on whether the cracking is minor, extensive, or extreme, a technical, Type B, or Type A violation may be supported by the evidence, and used to justify the determination.

Continued on next page

3-3155: Deficient Practice Statement, Continued

Requirements with multiple components

Some licensing requirements consist of multiple components. The licensee must maintain compliance with **each facet** of the requirement. Noncompliance with just one component of a multi-faceted licensing requirement may be sufficient evidence for a deficiency of the entire requirement.

Confidential names

The identity of persons in care or any individuals (including staff) who will be referred to in a report, **must remain confidential**. Every effort should be made to protect the privacy of persons in care or family members, especially regarding information gathered during interviews.

Additionally, when the deficient practice statement references personnel files or staff training, a separate coding system should be developed to identify the staff affected by the report without using their names.

Identifiers

An **identifier** is a coded alias that provides for confidentiality of an individual. This alias can consist of letters, numbers, or a combination of both.

Example: identifiers

The table below gives an example of using an identifier.

Person Involved in the Case	Identifier Used
Resident "Mary Smith"	"Resident #4" or "R4"
Child in care "John Wilson"	"Child 1"

Referencing confidential names

An individual's name must not appear in the Facility Evaluation Report (LIC 809) or the Complaint Investigation Report (LIC 9099). Individuals are referred to in a report by identifiers. These same identifiers appear both in the deficient practice statement and in the findings.

Instead, the confidential names of persons in care, with their corresponding identifiers, will be listed on the Confidential Names (LIC 811) form. Other individuals for whom identifiers are used may be listed on a Detail Supportive Information (LIC 812) form.

Continued on next page

3-3155: Deficient Practice Statement, Continued

Reusing confidential names/ identifiers

Each identifier used in a report must be unique, to avoid confusion.

If a Plan of Correction inspection references an individual assigned an identifier in the previous report, the Licensing Program Analyst should try to use the same identifier used for that individual in the earlier report.

Handling reassigned confidential names

At times, a particular identifier may not be available for reuse, such as when newer reports have reassigned an identifier originally used to reference a different person.

The table below shows the process for determining when to use a pre existing identifier and when to assign a new one.

If the identifier the Licensing Program Analyst wishes to use ...	Then the identifier is ...
is unassigned, or will be assigned to the same individual as on recent previous reports	available and can be used.
has been used for another individual at that facility	not available ; a new identifier must be created so that the same identifier is not used for two different individuals at the same facility.

Anonymous sources

If the interviewee does not wish the licensee to know the source of the information provided to you, the information may be recorded on the Facility Evaluation Report (LIC 809) and the Complaint Investigation Report (LIC 9099) without an identifier.

Important! Whenever anonymity is granted in such situations, the interviewee **must** be told that there is no guarantee this information will remain confidential, as it is possible a court may require that any confidential information in the case be disclosed.

Continued on next page

3-3155: Deficient Practice Statement, Continued

**Using
anonymous
sources:
LIC 812**

Since the Detail Supportive Information (LIC 812) is always considered a confidential form, its use is preferable for recording information received by an anonymous source.

When a LIC 812 form is used

- the anonymously-sourced information must still be accounted for as part of the narrative on the publicly filed licensing report, with details kept on the LIC 812, and
- the anonymous source must be made aware that a court proceeding could result in the confidential information becoming part of the public record.

**Using
anonymous
sources:
LIC 809 or
LIC 9099**

When referencing an anonymous source on a Facility Evaluation Report (LIC 809) or Complaint Investigation Report (LIC 9099), instead of employing an identifier, the Licensing Program Analyst should state, “during a confidential interview ...” to indicate a source as anonymous.

Note: When an interviewee’s identity is not disclosed to the facility, the LIC 809 or LIC 9099 must contain sufficient information for the licensee to

- correct the deficient practice, or
- contest the deficiency, if desired.

Continued on next page

3-3155: Deficient Practice Statement, Continued**Example:
anonymously-
sourced
information**

If a Licensing Program Analyst (LPA) receives information on a complaint investigation at a particular Child Care facility from an anonymous source (via interview), the LPA's procedure of accepting and recording the information would follow the steps shown in the table below.

Step	Action
1	The LPA explains to the anonymous source that, while their identity and the details of their information will be kept confidential by the Department, it is possible that a court proceeding could release these items into the public record.
2	If the anonymous source wishes to proceed, then the information must be documented. If the anonymous source decides not to proceed, then their information is not recorded and cannot be considered as evidence in the complaint investigation.
3	The LPA records the details of the interview on a Detail Supportive Information (LIC 812) form, which is filed in the confidential section of the facility file.
4	On the publicly-filed Complaint Investigation Report (LIC 9099), the LPA must include enough of the anonymously-sourced information to make the narrative clear to the licensee and the public. The LPA must not use an identifier for the anonymous source (such as "S4"). The LPA includes the received information in the LIC 9099 narrative with the sentence, "During a confidential interview, LPA was informed that children were being spanked for bad behavior."

3-3156: Documentation When a Citation Is Not Issued

Documenting consultations and advice

There are times when it is necessary to provide documentation when a violation does not exist or has not been cited. When no violation has been cited, but the Licensing Program Analyst needs to provide written consultation or direction to the licensee, a technical violation or technical assistance may be issued instead.

Documenting a technical violation

A deficiency that does not represent a risk to the health, safety, or personal rights of a person in care will not be cited. This type of deficiency is a technical violation and is documented using an **Advisory Notes – Technical Violation** (LIC 9102TV) form.

Important! For a technical violation that is substantiated as a result of a complaint, the allegation and findings of that violation are documented on a Complaint Investigation Report (LIC 9099) form, **not** on an Advisory Notes – Technical Violation (LIC 9102TV) form. For more information, see 3-3252: Writing a Complaint Investigation Report.

Giving technical assistance

If the Licensing Program Analyst determines that it would be constructive to communicate technical assistance which is not in connection with a technical violation to the licensee, then this is done by the use of the **Advisory Notes – Technical Assistance** (LIC 9102TA) form.

Advisory Notes facts

Advisory notes are

- documentation of a technical violation or technical assistance which is provided to the licensee without issuing a citation, and
- a record for the Licensing Program Analyst to refer to as background or supplemental information.

Advisory notes are **never**

- associated with a Plan of Correction or Civil Penalty Notice, or
- used as a basis to take Administrative Action against the licensee.

Continued on next page

3-3156: Documentation When a Citation Is Not Issued, Continued

**Filing a
LIC 9102TV or
LIC 9102TA
form**

Completed Advisory Notes – Technical Violation (LIC 9102TV) and Advisory Notes – Technical Assistance (LIC 9102TA) forms are filed in the **public** section of the facility file and must contain no confidential information.

Important! Former instructions were to file the Advisory Notes (LIC 9102) form in the confidential part of the facility file. Past LIC 9102 forms **must remain** in the confidential part of the file, since some of the content may have been confidential information. Confidential documents can become public (with confidential information redacted) as a result of a Public Records Act request.

**Summary of
non-citation
documentation
procedures**

The table below summarizes when the Licensing Program Analyst must use the Advisory Notes – Technical Violation (LIC 9102TV), Advisory Notes – Technical Assistance (LIC 9102TA), or Complaint Investigation Report (LIC 9099) forms to document a technical violation or technical assistance.

Type of Inspection	When documenting a Technical Violation	When documenting Technical Assistance for the licensee
Complaint	Document on a Complaint Investigation Report (LIC 9099).	Document on a Advisory Notes – Technical Assistance (LIC 9102TA) form.
Non-Complaint	Document on a Advisory Notes – Technical Violation (LIC 9102TV) form.	Document on a Advisory Notes – Technical Assistance (LIC 9102TA) form.

**Advisory
Notes: further
information**

For more information on the use of Advisory Notes and technical violations, see Reference Material for Facility Inspections, 3-4514: Technical Violations, and 3-4604: Written Consultation.

3-3180: On-Site Correction of Deficiencies

Overview

Contents

This section covers deficiencies that are, or need to be, corrected immediately while the Licensing Program Analyst is still on facility premises.

Topic	See Page
3-3181: On-Site Correction of Deficiencies	51

3-3181: On-Site Correction of Deficiencies

Correction of a deficiency is always documented

At times, a deficiency is found during an on-site inspection that the licensee, administrator or facility representative corrects immediately. It is important that the Licensing Program Analyst (LPA) always document these deficiencies, even when they are remedied before the LPA has concluded the inspection.

Immediately corrected Type A deficiencies

If, during the inspection, a deficient practice is found that poses an immediate (Type A) risk to the health, safety or personal rights of persons in care, but the licensee immediately corrects the deficiency, a determination of “not met” must still be documented on the licensing report, and a citation written.

Immediately corrected Type B deficiencies

If, during the inspection, a deficient practice is found that poses a potential (Type B) risk to the health, safety or personal rights of persons in care, but the licensee immediately corrects the deficiency, a determination of “not met” must still be documented.

For an **immediately-corrected** Type B deficiency, the Licensing Program Analyst (LPA) may have a choice regarding where to document the deficiency, as shown on the table below.

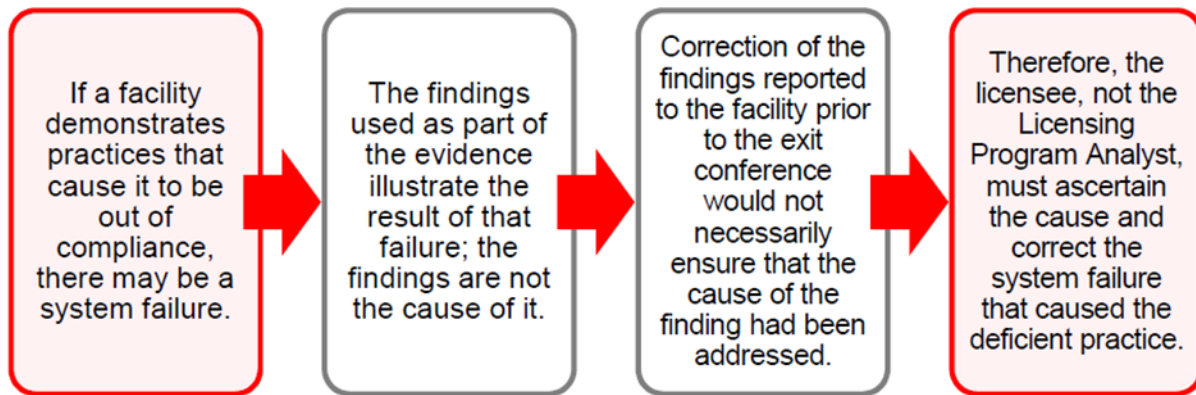
If ...	Then ...
<ul style="list-style-type: none"> the facility does not have a history of compliance currently shows evidence of serious noncompliance shows a disregard for the regulations, or has been repeatedly out of compliance on the same violation 	the LPA must document and cite the immediately-corrected deficiency on the applicable licensing report – Facility Inspection Report (LIC 809) or Complaint Investigation Report (LIC 9099).
<ul style="list-style-type: none"> the facility has a history of compliance, and currently shows no evidence of serious noncompliance 	the LPA may decline to cite the immediately-corrected deficiency and document the correction on an Advisory Notes – Technical Violation (LIC 9102TV) form.

Continued on next page

3-3181: On-Site Correction of Deficiencies, Continued

Why document immediately corrected deficiencies?

The graphic below explains why it is important to always document a citable (Type A or B) deficiency, even when it is corrected immediately during the on-site inspection.



Documenting technical violations

Unlike Type A and B deficiencies, technical violations are not cited, and are therefore not documented on licensing reports. Instead, an **Advisory Notes – Technical Violation** (LIC 9102TA) form is used to document a technical violation for the licensee. For more information, see 3-3156: Documentation When a Citation Is Not Issued.

Authority: citation of on-site corrections

The authority for a Licensing Program Analyst to document a deficiency even when a noncompliant practice is corrected immediately derives from the California Code of Regulations (CCR), Title 22:

- For Adult and Senior Care facilities, and Children’s Residential facilities, authority is derived from CCR Title 22, **Division 6**. For more information, see “Authority: citation” in this section.
- For Child Care facilities, authority is derived from CCR Title 22, **Division 12**. For more information, see “Authority: citation, continued” in this section.

Continued on next page

3-3181: On-Site Correction of Deficiencies, Continued

**Authority:
citation
(Division 6)**

The table below lists specific sections of ***Title 22, Division 6 of the California Code of Regulations*** where the authority to issue a citation is described.

Chapter	Section	Section Language
1. General Licensing Requirements	§ 80052(a)	When a licensing evaluation is conducted and the evaluator determines that a deficiency exists the evaluator shall issue a notice of deficiency, unless the deficiency is not serious and is corrected during the visit.
2. Social Rehabilitation Facilities	§ 81052(a)	When a licensing evaluation is conducted and the evaluator determines that a deficiency exists the evaluator shall issue a notice of deficiency, unless the deficiency is not serious and is corrected during the visit.
8.5 Residential Care Facilities for the Chronically Ill	§ 87852(a)	When a licensing evaluation is conducted and the evaluator determines that a deficiency exists the evaluator shall issue a notice of deficiency, unless the deficiency is not serious and is corrected during the visit.
3. Adult Day Programs	§ 82052(a)	When the licensing agency determines that a deficiency exists pursuant to Health and Safety Code Section 1534(a)(2), it shall issue a notice of deficiency, unless the deficiency is not serious and is corrected during the visit.
5. Group Homes	§ 84051(b)	Failure to operate according to the plan of operation, as specified in Section 84222, may result in a citation for a serious deficiency.
7.3 Crisis Nurseries	§ 86552(a)	When a licensing evaluation is conducted and the licensing program analyst determines that a deficiency exists, the licensing program analyst shall issue a notice of deficiency, unless the deficiency is not serious and is corrected during the visit.
8. Residential Care Facilities for the Elderly	§ 87756(c)	When a routine visit, evaluation or investigation of a complaint is conducted and the evaluator determines that a deficiency exists, the evaluator shall issue a notice of deficiency, unless the deficiency is minor and corrected during the visit.
9.5 Foster Family Homes	§ 89252(a)	When a licensing agency visits a home and determines that a deficiency exists, the licensing agency shall issue a notice of deficiency unless the deficiency is not serious and is corrected during the visit.

Continued on next page

3-3181: On-Site Correction of Deficiencies, Continued

Authority: citation (Division 12) The table below lists specific sections of ***Title 22, Division 12 of the California Code of Regulations*** where the authority to issue a citation is described.

Chapter	Section Number	Section Language
1. Child Care Center General Licensing Requirements	§101193(a)	If during a licensing evaluation the evaluator determines that a deficiency exists, the evaluator shall issue a notice of deficiency unless the deficiency is not serious and is corrected during the visit.

Urgent correction of deficiencies To protect the health, safety or personal rights of persons in care, the Licensing Program Analyst may determine that a deficient practice requires immediate corrective action.

Process for urgent corrective action If a deficient practice requires an urgent plan of correction, the licensee may be required to take action before the Licensing Program Analyst leaves the facility.

In these cases, the licensee is required to

- create an immediate plan to correct the deficiency
- put the plan of correction into effect, and
- sign and date the Facility Evaluation Report (LIC 809) or Complaint Investigation Report (LIC 9099) indicating that the deficiency has been identified, understood and corrected.

3-3190: Citation Writing Tools

Overview

Contents

This section provides helpful tools for Licensing Program Analysts to ensure the creation of quality citation documentation.

Topic	See Page
3-3191: Criteria for Writing a Citation of Deficiency	56
3-3192: Example of a Written Citation of Deficiency	57
3-3193: Quality Assurance Auditing Tool	58

3-3191: Criteria for Writing a Citation of Deficiency

Procedure for writing a citation

The table below shows the steps to write a citation for noncompliance. Filling in the prompts (shown by red blocks) in the corresponding parts of this tool, will assemble a complete and well-documented citation.

Step	Action
A	Support the statement with <i>relevant facts/findings</i> .
B	Select the applicable <i>statutory/regulatory reference</i> .
C	Write a <i>deficient practice statement</i> .

A. Relevant facts/findings

Findings: Facts and findings (who, what, when, where, and how) relevant to the deficient practice, which is based upon

- Observations (date, time, location)
- Interviews (date, time, identifiers), or
- Record reviews (record type, date).

The LPA toured the facility with the *[Administrator, licensee, etc.]* on *[date and time]*

B. Statutory/regulatory reference

Cited statute/regulation (or Interim Licensing Standard) section number and language:

This requirement is not met as evidenced by:

C. Deficient practice statement

Based on *[observation/interview/record review]* the licensee did not *[insert language from the statute/regulation or Interim Licensing Standard that pinpoints what the facility did not do]* in *[numbers]* of *[total numbers]* persons in care (*[show identifiers of those affected]*) which *[choose the level of risk, below]*

- Type A – “poses an immediate Health, Safety, or Personal Rights risk to persons in care,” or
- Type B – “poses a potential Health, Safety, or Personal Rights risk to persons in care.”

Composition example

See 3-3192: Example of a Written Citation of Deficiency for a hypothetical result of using this tool to compose a citation.

3-3192: Example of a Written Citation of Deficiency

Purpose

This tool provides an example of a written citation for a Residential Care Facility for the Elderly. The general structure and language can be adapted to any other facility type, program or situation.

A. Relevant facts/findings

The deficient practice statement is followed by the facts/findings.

Five records of residents with dementia were reviewed with the Administrator on 9/2/16 at 1:15 p.m. Resident #3's last medical appraisal was done on 5/14/15. Resident #5's last medical reappraisal was done on 4/2/15. The Administrator verified that the medical appraisal dates for Residents #3 and #5 were the most current.

B. Statutory/regulatory reference

The language of the specific statutory/regulatory reference (or Interim Licensing Standard) is placed in the Deficiencies column of the Facility Evaluation Report (LIC 809D) or Complaint Investigation Report (LIC 9099D).

87705(c)(5) Care of Persons with Dementia (c) Licensees who accept and retain residents with dementia shall be responsible for ensuring the following: (5) Each resident with dementia shall have an annual medical assessment as specified in Section 87458, Medical Assessment, and a reappraisal done at least annually, both of which shall include a reassessment of the resident's dementia care needs.

This requirement is not met as evidenced by:

C. Deficient practice statement

The statutory/regulatory reference is followed by the deficient practice statement.

Based on interview and record review, the licensee did not ensure that annual medical reappraisals were done for 2 of 5 residents (Residents #3 and #5) with dementia which poses a potential Health risk to residents in care.

3-3193: Quality Assurance Auditing Tool

Deficiency Quality Assurance Auditing Tool

Documentation Principles		Yes	No	Notes
Facts/ Findings	are organized and presented in a concise and logical sequence; language is clear, objective, easily understood; use active voice and past tense.			
	include the same identifiers listed in the deficient practice statement (no names).			
	include the same sources of evidence found in the deficient practice statement, including dates, times and locations.			
	reflect facts, not assumptions.			
	include the pertinent who, what, when, where, how.			
	include only evidence to support deficient practice; do not include advice, comments, extraneous remarks, or vague terminology.			
	are only relevant to the cited deficiencies.			
	do not include confidential information.			
	are sufficient to support what is said in the deficient practice statement.			
Statutory/ regulatory reference	correlates with Deficient Practice Statement.			
	includes number and language of the statute, regulation, or Interim Licensing Standard cited.			
	is specific, including the subsection.			
	includes an explicit statement that the requirement was "not met."			
Deficient practice statement	includes the source(s) of information through which evidence was obtained.			
	includes specifics of what the facility did or did not do which caused noncompliance, does not simply repeat the requirement without context.			
	includes extent/number of deficient cases relative to case universe.			
	includes identifiers of persons in the case.			
	includes the level of risk (Type A or Type B).			
Reviewer:		Date of LIC 809:		
Facility:		Date of LIC 9099:		

Part 2

Forms and Procedures

Overview

Contents

Part 2 includes detailed instruction on the use of forms that are frequently used to document facility inspections and investigations, along with procedures to help ensure each case is documented clearly and completely.

Topic	See Page
Chapter 3 Inspection/Investigation Reports	60
Chapter 4 Other Forms and Reports	91
Chapter 5 Resolving Deficient Practice Citations	119

Chapter 3 Inspection/Investigation Reports

Overview

Contents

This chapter will cover the forms that the Licensing Program Analyst will commonly use to record the details of a facility inspection or investigation.

Topic	See Page
3-3200: Facility Evaluation Report (LIC 809)	61
3-3250: Complaint Investigation Report (LIC 9099)	74

Electronic vs. paper forms

The descriptions in this chapter assume the Licensing Program Analyst will be working with digital forms in FAS. When a paper form is used, some of the examples and procedures in this chapter may not apply, or the form layout may be different than the digital form shown.

The table below shows pages of the Facility Inspection Report (LIC 809) and Complaint Investigation Report (LIC 9099) that only refer to the digital version of those forms in FAS.

Form Code	Only on FAS Version
LIC 809	<ul style="list-style-type: none"> • LIC 809 (first page) • LIC 809C (overflow narrative) • LIC 809D (deficiencies/Plan of Correction)
LIC 9099	<ul style="list-style-type: none"> • LIC 9099 (first page) • LIC 9099C (overflow narrative) • LIC 9099D (deficiencies/Plan of Correction)

3-3200: Facility Evaluation Report (LIC 809)

Overview

Contents

This section describes the use of the Facility Evaluation Report (LIC 809) form.

Topic	See Page
3-3201: Using the Facility Evaluation Report	62
3-3202: Writing a Facility Evaluation Report	69
3-3203: Documenting Child Care Centers	72

3-3201: Using the Facility Evaluation Report

What is the Facility Evaluation Report (LIC 809)?

The ***Facility Evaluation Report (LIC 809)*** is the form used by a Licensing Program Analyst to record the narrative of a **non-complaint** licensing inspection.

Non-complaint facility inspections

The following types of licensing inspections are considered ***non-complaint inspections*** which are documented using the Facility Evaluation Report (LIC 809) form:

- Pre-licensing Inspection
- Post-licensing Inspection
- Required Annual or Comprehensive Inspection
- Random Sample Inspection
- Collateral Visit
- Case Management Inspection, and
- Plan of Correction Inspection.

Note: For more information on the different inspection types, see Reference Material for Facility Inspections.

When to use: LIC 809

The Licensing Program Analyst should begin a new Facility Evaluation Report (LIC 809) for each new non-complaint licensing inspection.

Additional report forms can also be used when there is not enough room on one form to document all citations for a given licensing inspection. In FAS, multiple LIC 809C forms, attached to the LIC 809, may be used for this purpose.

Continued on next page

3-3201: Using the Facility Evaluation Report, Continued

Example: The graphic below shows the top of the first page of a Facility Evaluation Report (LIC 809).
basic information

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION	
FACILITY EVALUATION REPORT		CCLD Regional Office, 770 THE CITY DR., SUITE 7100 ORANGE, CA 92668	
basic information			
FACILITY NAME:	SHADY ACRES SENIOR HOME	FACILITY NUMBER:	193600132
ADMINISTRATOR:	JOHN DOE	FACILITY TYPE:	740
ADDRESS:	123 MAIN STREET	TELEPHONE:	(916) 555-5555
CITY:	SOMEWHERE	ZIP CODE:	95600
CAPACITY:	44	DATE:	06/17/2017
TYPE OF VISIT:	Annual/Random	TIME BEGAN:	09:00 AM
MET WITH:	John Doe	TIME COMPLETED:	12:45 PM
NARRATIVE			
1	An unannounced visit was conducted by the Licensing Program Analyst (LPA) Jones on 6/17/17 at 9 am. During the visit,		
2	LPA met with John Doe, Administrator, and toured the facility inside and out. The facility's fire clearance is approved for		

Example notes: basic information

The table below describes fields that must be completed at the top of the Facility Evaluation Report (LIC 809).

Item	Description
facility name	The name of the facility.
facility number	The specific identification number assigned to this facility as part of the application licensing process.
administrator	The name of the facility administrator.
facility type	The code number associated with the type of facility being inspected.
telephone	The facility's primary telephone number.
<ul style="list-style-type: none"> address city state, and zip code 	The facility's location.

(1 of 2)

Continued on next page

3-3201: Using the Facility Evaluation Report, Continued

**Example
notes: basic
information,
continued**

The table below describes fields that must be completed at the top of the Facility Evaluation Report (LIC 809).

Item	Description
capacity	The maximum number of persons in care the facility has been authorized to accept.
census	The number of persons in care currently enrolled or in residence at the facility.
type of visit	The type of inspection performed.
met with	The name of the facility representative present during this inspection. This may be the facility Administrator, or the staff person representing the Administrator.
date	The date the inspection took place.
<ul style="list-style-type: none"> time began, and time completed 	<i>Time Began</i> and <i>Time Completed</i> must accurately reflect the times the Licensing Program Analyst entered and departed the facility; they cannot be left blank.

(2 of 2)

**Example:
narrative**

The graphic below shows the narrative section of the Facility Evaluation Report (LIC 809).

NARRATIVE		
1	An unannounced visit was conducted by the Licensing Program Analyst (LPA) Jones on 6/17/17 at 9 am. During the visit,	A
2	LPA met with John Doe, Administrator, and toured the facility inside and out. The facility's fire clearance is approved for	
3	delayed egress. Centrally stored medications are locked in a kitchen cabinet. Pro re nata medications have written orders	
4	from a physician. Toxic chemicals are locked in a cabinet in the laundry room. The facility has a written emergency plan.	
5		
6	There is at least a one week supply of nonperishable, and two-day supply of perishable foods. The facility is maintained at	B
7	70 degrees, the residents state it is comfortable. Hot water temperature measures 118 degrees F. There are working lights	
8	in each room and the residents state that lighting is fine in their rooms. There are grab bars for each toilet and bathtub.	
9	Bathtub has a non-skid mat.	
10		
11	Five records of residents with dementia were reviewed with the Administrator on 6/26/17 at 1:15 pm. Resident #3's last	C
12	medical appraisal was done on 5/14/15. Resident #5's last medical appraisal was done on 4/2/15. The Administrator verified	
13	that the medical appraisals dates for Residents #3 and #5 were the most current.	
14		
15		

Continued on next page

3-3201: Using the Facility Evaluation Report, Continued

**Example
notes:
narrative**

The table below describes areas highlighted in the narrative graphic.

Item	Example
A: introductory statement	"An unannounced visit was conducted by the Licensing Program Analyst (LPA) Jones on 6/17/17 at 9 a.m. During the visit, LPA met with John Doe, Administrator, and toured the facility inside and out."
B: contextual data	"The facility's fire clearance is approved for delayed egress. Centrally stored medications are locked in a kitchen cabinet."
C: facts/findings	"Five records of residents with dementia were reviewed with the Administrator on 6/17/17 at 9:15 a.m. Resident #3's last medical appraisal was done on 5/14/15. Resident #5's last medical appraisal was done on 4/2/15. The Administrator verified that the medical appraisals dates for Residents #3 and #5 were the most current."

**Space
limitations**

The narrative section of the first page of the Facility Evaluation Report (LIC 809) provides 25 lines for text entry. If needed, there are an additional 32 lines for narrative on the **LIC 809C**. A total of 57 text lines are therefore available for the written narrative on the LIC 809/LIC 809C form.

Note: The Licensing Program Analyst may add additional LIC 809C forms to extend the amount of space, if the written narrative exceeds this basic amount.

Continued on next page

3-3201: Using the Facility Evaluation Report, Continued

Example: The graphic below shows the bottom of every page of the Facility Evaluation Report (LIC 809), where contact details and signatures must be included.

signatures

24
25

SUPERVISOR'S NAME: Adam Smith **TELEPHONE:** (916)555-7777

LICENSING EVALUATOR NAME: Susan Jones **TELEPHONE:** (530)555-6666

LICENSING EVALUATOR SIGNATURE: **DATE:**

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: **DATE:**

Example The table below describes fields highlighted in the signatures graphic.

notes:

signatures

Person	Required Information
A: the Licensing Program Manager	<ul style="list-style-type: none"> • name • telephone number
B: the Licensing Program Analyst	<ul style="list-style-type: none"> • name • telephone number • signature • date of signing
C: the facility representative	<ul style="list-style-type: none"> • signature • date of signing

Continued on next page

3-3201: Using the Facility Evaluation Report, Continued

Example:
LIC 809C

The “overflow” page of the Facility Evaluation Report (LIC 809) is referred to as the **LIC 809C**. The graphic below shows the top of this page.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 770 THE CITY DR., SUITE 7100 ORANGE, CA 92668	
FACILITY EVALUATION REPORT (Cont)			
FACILITY NAME: SHADY ACRES SENIOR HOME		A	FACILITY NUMBER: 193600132
			VISIT DATE: 06/17/17
NARRATIVE			
1	B		
2			
3			
4			
5			
6			
7			
8			

Example notes:
LIC 809C

The table below describes fields highlighted in the LIC 809C graphic.

Item	Required Information
A: facility name, number and inspection date	The following information must appear at the top of the page: <ul style="list-style-type: none"> • facility name • facility number, and • date of the inspection.
B: narrative overflow	The Narrative section allows 32 lines for overflow of documentation that did not fit on the first page of the Facility Evaluation Report (LIC 809A). Additional LIC 809C forms may be added as needed.

Continued on next page

3-3201: Using the Facility Evaluation Report, Continued

Example: The final page of the Facility Evaluation Report (LIC 809) is referred to as the **LIC 809D**. The graphic below shows the top of this page.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066	
FACILITY EVALUATION REPORT (Cont)			
FACILITY NAME: SHADY ACRES SENIOR HOME		FACILITY NUMBER: 193600132	
DEFICIENCY INFORMATION FOR THIS PAGE:		VISIT DATE: 06/17/2017	
Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type B 07/17/2017 Section Cited CCR 87705(c)(5) A	1 87705 Care of Persons with Dementia (c) (5) 2 Each resident with dementia shall have an annual 3 medical assessment as specified in Section 4 87458, Medical Assessment, and a reappraisal 5 done at least annually, both of which shall include 6 a reassessment of the resident's dementia care 7 needs. This requirement not met as evidenced by: 8 Based on interview and record review, licensee 9 failed to ensure that annual medical reappraisals 10 were done for 2 of 5 residents (Residents #3 and 11 #5) with dementia which poses a potential Health 12 risk to residents in care. B	1 2 3 4 5 6 7 8 9 10 11 12 13 14 C	

Example notes:
LIC 809D

The table below describes fields highlighted in the LIC 809D graphic.

Note: For more on the statutory/regulatory reference, see 3-3150: Components of a Citation.

Item	Required Information
A: deficiency type, due date and cited section number	The violation type, Plan of Correction (POC) due date, and the section number of the licensing requirement supporting the citation are entered next to each cited deficiency.
B: deficiencies	The written statutory/regulatory reference (or Interim Licensing Standard), followed by the deficient practice statement, is placed in the <i>Deficiencies</i> column.
C: plan of correction (POCs)	The POC will be entered beside the corresponding deficiency.

3-3202: Writing a Facility Evaluation Report

LIC 809 writing guidelines

In general, the Facility Evaluation Report (LIC 809) is a report that focuses on deficiencies. When supportive comments are formally reported, they must be

- objective
- factual
- time limited, and
- specific to the conditions observed during the inspection.

Note: A facility report must always be written to only describe the precise circumstances of an inspection; overly broad comments on the report may actually impede the correction of deficient practice, and may be indefensible in a legal proceeding.

Example: appropriate and inappropriate comments

The table below shows examples of **appropriate** and **inappropriate** comments describing a hypothetical inspection situation.

Situation: Prior to an unannounced inspection, the facility history consisted of an unclean kitchen area.

Appropriate Comment	Inappropriate Comments
"The kitchen area was accessible and free of debris at the time of the inspection."	<ul style="list-style-type: none"> • "The facility is always clean." • "The licensee does an excellent job." • "In my opinion, this is an excellent facility."

Information baseline

At a minimum, a Facility Evaluation Report (LIC 809) must include:

- who made the inspection (the Licensing Program Analyst's name)
- who was in charge at the facility
- the purpose of the inspection
- the evidence collected (observation, interview, record review)
- the relevant facts and findings supported by the evidence
- deficient practice discovered, and cited when appropriate
- the risk level attached to each deficiency
- a plan of correction, and
- all required signatures and dates.

Continued on next page

3-3202: Writing a Facility Evaluation Report, Continued

Issuing citations

Important! All violations that pose an immediate risk to the health, safety or personal rights of persons in care **must be specified and cited** on the licensing report by the Licensing Program Analyst, even if such violations are immediately corrected at the time of the inspection.

Report writing procedure

The table below describes the basic process a Licensing Program Analyst (LPA) must follow to complete a Facility Evaluation Report (LIC 809).

Note: All of these steps are completed prior to leaving the facility.

Step	Action
1	The facility is toured, necessary interviews and record review are conducted.
2	<ul style="list-style-type: none"> A work space is requested on the premises to complete the report. The space should afford the ability to concentrate and be free of distractions. Permission is requested from the facility when an outlet is needed for laptop use.
3	Any supporting documentation is completed before the LIC 809 is written.
4	The top of all pages of the form is filled in.
5	If no citation is being issued , the LPA must indicate "No Deficiency Cited."
6	If any citations are being issued , the <i>Narrative</i> and <i>Deficiencies</i> sections are filled out appropriately (see "Organizing the report," in this section).
7	The completed report is reviewed with the facility representative and a Plan of Correction is devised for any deficiency.
8	Both the LPA and the facility representative sign and date all pages of the report and a copy is left with the facility.

Continued on next page

3-3202: Writing a Facility Evaluation Report, Continued

Organizing the report

When writing a Facility Evaluation Report (LIC 809), narrative details, deficiencies and their supporting evidence must be organized for clarity and logical presentation.

The table below lists the steps of proper organization.

Step	Action
1	Facts accumulated during the inspection, normally through use of an inspection tool, are used to write the narrative.
2	The introductory statement is written at the top of the <i>Narrative</i> section, providing basic information about the inspection.
3	Any contextual data is arranged in chronological order of discovery and relevance, and added to the <i>Narrative</i> section.
4	The deficiencies are organized in order of risk level, highest to lowest.
5	The findings are grouped by deficiency and the groups are arranged in the same order in which the corresponding deficiencies were organized in Step 3.
6	The grouped and ordered findings of the inspection are added to the <i>Narrative</i> section (using the LIC 809C for overflow, if necessary).
7	The <i>Deficiencies</i> section is filled out, with deficiencies listed in the order determined in Step 3.

Separate complaint and facility reports

Any deficiencies found during a complaint investigation which are **unrelated** to the complaint must be recorded on a separate Facility Evaluation Report (LIC 809).

All findings **relevant** to the complaint investigation are recorded on a Complaint Investigation Report (LIC 9099). For more information, see 3-3252: Writing a Complaint Investigation Report.

3-3203: Documenting Child Care Centers

Special rules for child care centers

Inspections and investigations of child care centers largely follow the same procedures as other facility types; however

- **all** child care centers have a special posting requirement when cited for, or cleared of, a deficient practice, and
 - **combination child care centers** have an additional reporting procedure that Licensing Program Analysts must observe.
-

Posting requirements

All child care center licensees must post, for 30 consecutive days, the licensing document verifying compliance or noncompliance with the order to correct a deficiency that, if not corrected, will create a direct and immediate risk to the health, safety, or personal rights of children in care.

Note: This requirement addresses **Type A** violations and their correction. A statement of this posting requirement must be included on the Letter of Deficiency Citations Cleared or Deficiency is Cleared letter, or on the licensing report.

What is a combination child care center?

A **combination child care center** is a single facility which offers more than one type of care service; each service at the facility is licensed and inspected **separately**, according to the specific type of service offered.

Single licensing report

When writing a non-complaint report for a combination child care center, a Facility Evaluation Report (LIC 809) form is used and **each component service of the facility** must be clearly separated out from the others, normally by the use of multiple LIC 809 forms.

Note: All other report-writing rules still apply when writing a report for a combination center. For example, in **each** component of the facility, the report form must list Type A violations before Type B violations, etc.

Continued on next page

3-3203: Documenting Child Care Centers, Continued

Similar deficiencies

When the **identical** violation is cited in two or more component sections of a combination facility, the Licensing Program Analyst has two ways of documenting the deficiencies, while still keeping the documentation for each facility component separate.

The report can either

- describe each deficiency in full in its respective section, or
- describe the deficiency once and place a cross-reference to the full description in all other instances of that deficiency in the other sections.

Combination centers: completing a licensing report

When the Facility Evaluation Report (LIC 809) has been completed for a combination child care center, the report must be signed and dated by the director of the facility, according to the table below.

If ...	Then ...
the entire combination center is run by one director	that director must sign and date the bottom of every page of the report.
each component of the combination center has a separate director	each director must sign and date the bottom of those pages of the report that document the particular component of the facility that they oversee.

Combination centers: filing the report

Once a Facility Evaluation Report (LIC 809) for a combination child care center is appropriately signed and dated, a complete copy of the report (along with supporting documents) is

- left with **each** director, and
- placed in the facility file for **each** component of the facility.

3-3250: Complaint Investigation Report (LIC 9099)

Overview

Contents

This section describes the use of the Complaint Investigation Report (LIC 9099) form.

Topic	See Page
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3-3251: Using the Complaint Investigation Report

What is the Complaint Investigation Report?

The ***Complaint Investigation Report (LIC 9099)*** is the form used by a Licensing Program Analyst to record the general information and conclusion of a **complaint investigation**. It should not be confused with a *Complaint Report (LIC 802)*.

When to use: LIC 9099

The Licensing Program Analyst must begin a new Complaint Investigation Report (LIC 9099) for each new investigation of a complaint.

Additional report forms can also be used when there is not enough room on one form to document all allegations and citations for a given investigation, provided they are tracked with the same control number. In FAS, multiple LIC 9099C forms, attached to the LIC 9099, may be used for this purpose.

Example: basic information

The graphic below shows the top of the first page of a Complaint Investigation Report (LIC 9099).

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION	
COMPLAINT INVESTIGATION REPORT		CCLD Regional Office, 7575 METROPOLITAN DR. #109 SAN DIEGO, CA 92108	
This is an official report of an unannounced visit/investigation of a complaint received in our office on 06/15/2017 and conducted by Evaluator Susan Jones			
PUBLIC		COMPLAINT CONTROL NUMBER: 89-TR-20170607123332	
FACILITY NAME:	SHADY ACRES SENIOR HOME	FACILITY NUMBER:	193600132
ADMINISTRATOR:	JOHN DOE	FACILITY TYPE:	740
ADDRESS:	123 MAIN STREET	TELEPHONE:	(916) 555-5555
CITY:	SOMEWHERE	STATE: CA	ZIP CODE: 95600
CAPACITY:	44	CENSUS: 6	DATE: 06/17/2017
		UNANNOUNCED	TIME VISIT BEGAN: 09:00 AM
MET WITH:	John Doe		TIME COMPLETED: 12:45 PM

Continued on next page

3-3251: Using the Complaint Investigation Report, Continued

**Example
notes: basic
information**

The table below describes items highlighted in the *basic information* graphic.

Item	Description
facility name	The name of the facility.
facility number	The specific identification number assigned to this facility as part of the initial certification process.
administrator	The name of the facility administrator.
facility type	The code number associated with the type of facility being inspected.
telephone	The facility's primary telephone number.
<ul style="list-style-type: none"> • address • city • state, and • zip code 	The facility's location.
capacity	The maximum number of persons in care the facility has been authorized to accept.
census	The number of persons in care currently enrolled or in residence at the facility.
met with	The name of the facility representative present during this inspection. This may be the facility administrator, or simply the senior staff person on duty at the time.
<ul style="list-style-type: none"> • time began, and • time completed 	<i>Time Began</i> and <i>Time Completed</i> must accurately reflect the times the Licensing Program Analyst entered and departed the facility; they cannot be left blank.

**Filling in the
basic
information**

When conducting a complaint investigation, the information from the accompanying Complaint Report (LIC 802) can be used to fill in the top of the Complaint Investigation Report (LIC 9099).

Continued on next page

3-3251: Using the Complaint Investigation Report, Continued

Allegations

After the essential information has been filled in, the Licensing Program Analyst must list the allegation(s) that comprise the complaint.

Note: If necessary, more than one Complaint Investigation Report (LIC 9099) form may be used to clearly document each allegation and the associated investigation details. If this is done, the **Complaint Control Number** listed at the top of each Complaint Investigation Report (LIC 9099) form supporting a given investigation must match.

Example: complaint control number

The graphic below highlights the **Complaint Control Number** at the top of a Complaint Investigation Report (LIC 9099) form.

COMPLAINT INVESTIGATION REPORT		CLSD Regional Office, 7075 METROPOLITAN DRIVE #100 SAN DIEGO, CA 92108
This is an official report of an unannounced visit/investigation of a complaint recieved in our office on 06/15/2017 and conducted by Evaluator Susan Jones		
PUBLIC	COMPLAINT CONTROL NUMBER: 89-TR-20170607123332	

Example: allegations

The graphic below shows the **Allegation(s)** section of a Complaint Investigation Report (LIC 9099).

ALLEGATION(S):	
1	Dementia residents do not have updated physician reports.
2	allegations
3	
4	
5	
6	
7	
8	
9	
INVESTIGATION FINDINGS:	

Continued on next page

3-3251: Using the Complaint Investigation Report, Continued

Example notes: allegations

The Licensing Program Analyst must place the allegations of the complaint in the *Allegation(s)* section of the form.

Item	Example
allegations	"Dementia residents do not have updated physician reports."

Including multiple allegations

The Complaint Investigation Report (LIC 9099) provides nine lines for listing allegations on the report form. If more than one allegation is included in the complaint

- a separate LIC 9099A form must be used for each separate determination (***unfounded, substantiated, unsubstantiated*** or ***needs further investigation***) found, and
- several related allegations must not be presented by a single allegation (for instance, listing multiple food service allegations together as one).

Example: investigation findings

The graphic below shows the ***Investigation Findings*** section of a Complaint Investigation Report (LIC 9099).

INVESTIGATION FINDINGS:	
1	Licensing Program Analyst (LPA) Jones, conducted an unannounced complaint visit and met with the Administrator, John Doe. The Administrator was interviewed regarding the allegation.
2	
3	
4	Five records of residents with dementia were reviewed with the Administrator on 6/17/17 at 9:15am. Resident #3's last medical reappraisal was done on 5/14/15. Resident #5's last medical appraisal was done on 4/2/15. The Administrator verified that the medical appraisals dates for Residents #3 and #5 were the most current.
5	
6	
7	
8	The allegation was substantiated. The following deficiency was cited per CA Code of Regulations Title 22 – refer to the 9099D.
9	
10	
11	
12	
13	

Substantiated Estimated Date of Completion:

Continued on next page

3-3251: Using the Complaint Investigation Report, Continued

Example notes: investigation findings

The *Investigation Findings* section of the form will contain a brief narrative of the licensing investigation.

Item	Example
A: introduction	"Licensing Program Analyst (LPA) Jones conducted an unannounced complaint visit and met with the Administrator, John Doe. The Administrator was interviewed regarding the allegation."
B: facts/findings	"Five records of residents with dementia were reviewed with the Administrator on 6/17/17 at 9:15 am. Resident #3's last medical appraisal was done on 5/14/15. Resident #5's last medical appraisal was done on 4/2/15. The Administrator verified that the medical appraisals dates for Residents #3 and #5 were the most current."
C: determination	"The allegation was substantiated. The following deficiency was cited per CA Code of Regulations Title 22 – refer to the 9099D." Note: The determination cannot be filled in until the complaint investigation is complete.

Needs further investigation

When an allegation has not yet been given a determination of either ***unfounded***, ***substantiated*** or ***unsubstantiated***, it is considered to have a status of ***needs further investigation***.

If a Complaint Investigation Report (LIC 9099) is created while one or more allegations needs further investigation, that status must be recorded on the form page for those allegations, along with the amount of time estimated to complete the investigation for those items.

Note: When more than one allegation is recorded on the same form, allegations must always be grouped together by their determination type. Since each LIC 9099A form can only be assigned **one** of the four determination types, the selected determination must apply to **every** allegation reported on that particular form.

Continued on next page

3-3251: Using the Complaint Investigation Report, Continued

**Example:
determination
and signatures**

The graphic below shows the bottom of the first page of the Complaint Evaluation Report (LIC 9099), which includes the determination for all the allegations listed on that form, the estimated days to completion (if a determination has not yet been made), and required contact details and signatures.

**Example
notes:
determination**

The table below describes fields highlighted in the *determination and signatures* graphic.

Item	Explanation
A: determination	The determination (<i>unfounded, substantiated, unsubstantiated, or needs further investigation</i>) arrived at for all allegations listed on this particular form.
B: estimated days of completion	The estimated time to complete the investigation if the current status is <i>needs further investigation</i> . For all concluded investigations, this field is left blank.

Continued on next page

3-3251: Using the Complaint Investigation Report, Continued

**Example
notes:
signatures**

The table below describes fields highlighted in the *determination and signatures* graphic.

Note: The signatures and other required information shown here must appear at the bottom of every page of the Complaint Investigation Report (LIC 9099).

Person	Required Information
C: the Licensing Program Manager	<ul style="list-style-type: none">• name• telephone number
D: the Licensing Program Analyst	<ul style="list-style-type: none">• name• telephone number• signature• date of signing
E: the facility representative	<ul style="list-style-type: none">• signature• date of signing

**Space
limitations**

The *Investigation Findings* section of the Complaint Investigation Report (LIC 9099) provides 13 lines for text entry. If needed, there are an additional 32 lines for narrative on the **LIC 9099C**. A total of 45 text lines are therefore available for the written narrative on the LIC 9099/ LIC 9099C form.

Note: The Licensing Program Analyst may add additional LIC 9099C forms to extend the amount of space, if the written narrative exceeds this basic amount.

Continued on next page

3-3251: Using the Complaint Investigation Report, Continued

Example:
LIC 9099C

The “overflow” page of the Complaint Investigation Report (LIC 9099) is referred to as the **LIC 9099C**. The graphic below shows the top of this page.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION	
COMPLAINT INVESTIGATION REPORT (Cont)		CCLD Regional Office, 770 THE CITY DR., SUITE 7100 ORANGE, CA 92668	
FACILITY NAME: SHADY ACRES SENIOR HOME		A	FACILITY NUMBER: 193600132
			VISIT DATE: 06/17/2017
NARRATIVE			
1	B		
2			
3			

Example
notes:
LIC 9099C

The table below describes fields highlighted in the *LIC 9099C* graphic.

Item	Required Information
A: facility name, number and inspection date	<p>The following information must appear at the top of the page:</p> <ul style="list-style-type: none"> • facility name • facility number, and • date of the inspection.
B: narrative overflow	<p>The <i>Narrative</i> section allows 32 lines for overflow of documentation that did not fit on the first page of the Complaint Investigation Report.</p>

Continued on next page

3-3251: Using the Complaint Investigation Report, Continued

Example:
LIC 9099D

The final page of the Complaint Investigation Report (LIC 9099) is referred to as the **LIC 9099D**. The graphic below shows the top of this page.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 7575 METROPOLITAN DR. #109 SAN DIEGO, CA 92108	
COMPLAINT INVESTIGATION REPORT (Cont)			
FACILITY NAME: SHADY ACRES SENIOR HOME		FACILITY NUMBER: 193600132	
DEFICIENCY INFORMATION FOR THIS PAGE:		VISIT DATE: 06/17/2017	
Deficiency Type POC Due Date / Section Number Type B 07/17/2017 Section Cited CCR 87705(c)(5) A	DEFICIENCIES 1 87705 Care of Persons with Dementia (c) (5) 2 Each resident with dementia shall have an annual 3 medical assessment as specified in Section 4 87458, Medical Assessment, and a reappraisal 5 done at least annually, both of which shall include 6 a reassessment of the resident's dementia care 7 needs. This requirement not met as evidenced by: 8 Based on interview and record review, licensee 9 failed to ensure that annual medical reappraisals 10 were done for 2 of 5 residents (Residents #3 and 11 #5) with dementia which poses a potential Health 12 risk to residents in care. B	PLAN OF CORRECTIONS(POCs) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 C	

Example
notes:
LIC 9099D

The table below describes fields highlighted in the **LIC 9099D** graphic.

Note: For more on the statutory/regulatory reference, see 3-3150: Components of a Citation.

Item	Required Information
A: deficiency type, due date and cited section number	The violation type, Plan of Correction (POC) due date, and the section number of the licensing requirement supporting the citation are entered next to each cited deficiency.
B: deficiencies	The written statutory/regulatory reference (or Interim Licensing Standard), followed by the deficient practice statement, is placed in the <i>Deficiencies</i> column.
C: plan of corrections (POCs)	The POC will be devised by the licensee and placed beside the corresponding deficiency.

3-3252: Writing a Complaint Investigation Report

**LIC 9099
writing
guidelines**

Most of the information contained in 3-3402: Writing a Facility Evaluation Report also applies to writing a Complaint Investigation Report (LIC 9099). Differences and special considerations for the latter are detailed in this section.

**LIC 9099
privacy
concerns**

Important! Information included in a Complaint Investigation Report (LIC 9099) is public information. In cases where the complainant is a person in care at the facility being investigated, the Licensing Program Analyst (LPA) must take care to protect the confidentiality of the person in care.

Protecting complainant confidentiality requires

- carefully choosing language in the LIC 9099 narrative that does not “tip off” a reader to the specific identity of the complainant, and
- supporting the carefully chosen language on the LIC 9099 form with descriptive detail on a Detail Supportive Information (LIC 812) form.

Example: In the LIC 9099 narrative, the LPA writes “Resident #1 received burns and bruises.” The chosen language makes the narrative clear and correct, but does not describe the injuries in a way that makes the identity of Resident #1 immediately obvious. On a LIC 812 form, the LPA then describes the location, nature and appearance of the burns and bruises to complete the record.

**Separate
reports for
complaints
and
inspections**

During a complaint investigation, if a Licensing Program Analyst finds evidence of deficient practice that **is not** related to the complaint, it must be recorded and cited separately. This is made clear in the table below.

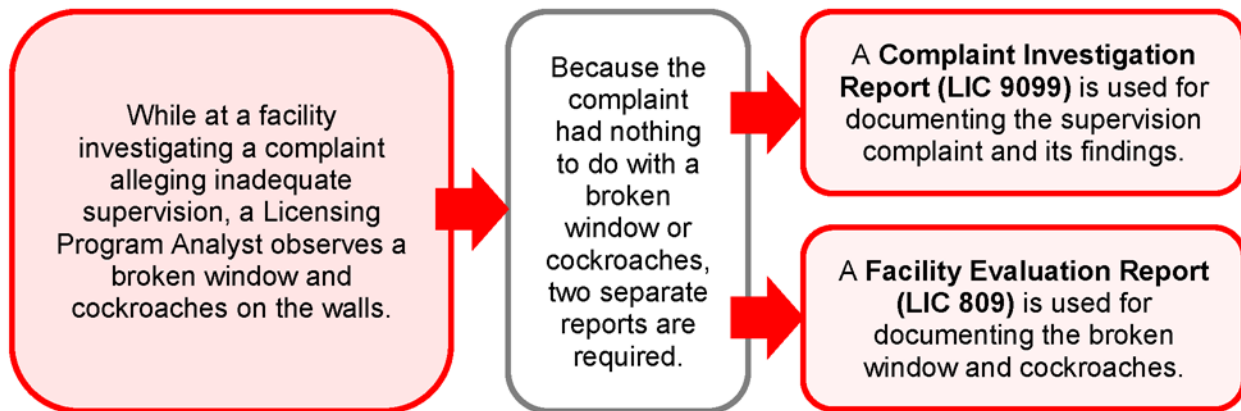
If ...	Then ...
evidence, findings or other information is related to the active complaint investigation	it should be recorded on a Complaint Investigation Report (LIC 9099) form.
evidence, findings or other information is not related to the active complaint investigation	it should be recorded on a separate Facility Evaluation Report (LIC 809) form.

Continued on next page

3-3252: Writing a Complaint Investigation Report, Continued

**Example:
separate
reports**

The graphic below describes the process for determining when information during a complaint investigation should be entered on a Complaint Investigation Report (LIC 9099), and when it should be entered on a Facility Evaluation Report (LIC 809).

**Complaints in
conjunction
with other
inspections**

When a Licensing Program Analyst performs a complaint investigation in conjunction with another inspection, then

- information pertaining to the complaint is recorded on a Complaint Investigation Report (LIC 9099), and
- information pertaining to the other inspection is recorded on a Facility Evaluation Report (LIC 809).

Continued on next page

3-3252: Writing a Complaint Investigation Report, Continued

Documenting multiple complaints

If one facility inspection is made in response to two or more separate complaints, a Complaint Investigation Report (LIC 9099) with a unique complaint control number must be used for **each** complaint. The table below summarizes this requirement.

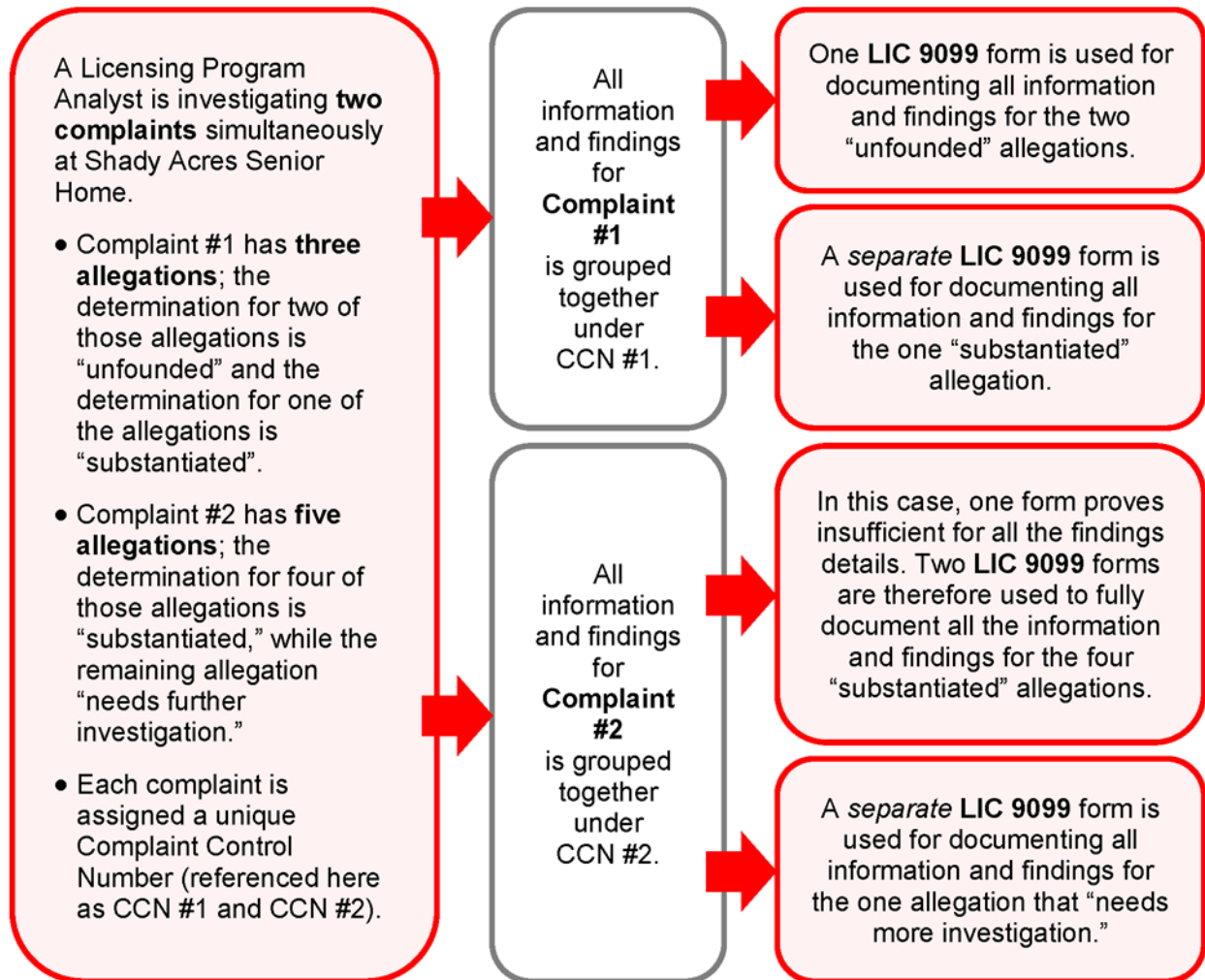
If ...	Then ...
<ul style="list-style-type: none"> • two complaints are being investigated at a facility • reporting for each complaint will fit on one form, and • all allegations have the same determination 	two LIC 9099 forms, with two separate control numbers, are used, one for each complaint.
<ul style="list-style-type: none"> • two complaints are being investigated at a facility, and • reporting for each complaint will not fit on one form apiece 	more than two LIC 9099 forms are used, as many as are needed to document each complaint. The information for the two complaints is kept separate and organized by the complaint control numbers, which must be unique for each complaint.
<ul style="list-style-type: none"> • two complaints are being investigated at a facility, and • allegations in one or both complaints do not have the same determination (unfounded, substantiated, etc.) 	multiple LIC 9099 forms are used, with information kept separate for each complaint. Within each complaint, information is then separated again, so that there is only one determination type on each form.

Continued on next page

3-3252: Writing a Complaint Investigation Report, Continued

**Example:
multiple
complaints**

The graphic below shows the process for using multiple Complaint Investigation Report (LIC 9099) forms for documenting more than one complaint investigation at the same facility, at the same time.



Continued on next page

3-3252: Writing a Complaint Investigation Report, Continued

Using the “needs further investigation” determination

There are occasions when an investigation cannot be completed during the initial facility inspection due to the serious nature of the violation – for example, physical or sexual abuse. In such cases, action by law enforcement or Investigations Branch, for example, may delay completion.

When a delay occurs, the Licensing Program Analyst must fill in certain elements of the Complaint Investigation Report (LIC 9099) as shown in the table below.

Form Element	Action
The determination type.	<i>Needs further investigation</i> is the assigned determination until the investigation is completed.
Estimated Time of Completion for the investigation.	Should be assigned a time period (such as 30, 45 or 90 days).
A document status of either <ul style="list-style-type: none"> • “PUBLIC,” or • “CONFIDENTIAL.” 	Should not be selected until the investigation is completed.
A risk level for the violation.	Should not be assigned until the investigation is completed.
The <i>Deficiencies</i> and <i>Plan of Corrections (POCs)</i> sections on the LIC 9099D.	Should not be completed at this time.

“Needs further investigation” procedures

Once a *needs further investigation* status is assigned to a complaint, there are specific procedures for notification of the licensee and the complainant that must be followed. These are detailed separately in the Evaluator Manual under 3-2000: Reference Material for Complaints.

When *needs further investigation* has been documented on the Complaint Investigation Report (LIC 9099), the bottom of the form must be

- signed and dated by the facility representative
- signed and dated by the Licensing Program Analyst, and
- a copy of the signed form left with the facility.

Continued on next page

3-3252: Writing a Complaint Investigation Report, Continued

Proceeding with an investigation

Whenever a facility inspection is not initially completed and *needs further investigation*, the Licensing Program Analyst (LPA) should consult with their Licensing Program Manager for direction on how and when to proceed after leaving the facility.

Note: Each complaint case will be different, and may involve a separate investigation by law enforcement that can delay resumption of the LPA's original investigation. For a comprehensive explanation of how and when an investigation may be completed under different circumstances, see Reference Material for Complaints.

Resuming the investigation after delay

After a temporarily delayed investigation is resumed, any additional inspection reporting will be recorded on a new Complaint Investigation Report (LIC 9099) form.

The new form will reflect the applicable determination of *unfounded*, *unsubstantiated*, or *substantiated*, and the normal course of the investigation is then completed.

When completed, the Licensing Program Analyst must make sure the new LIC 9099 form is

- signed and dated by the facility representative
- signed and dated by the Licensing Program Analyst, and
- a copy of the signed form left with the facility.

Note: Because it is a continuation of an existing investigation, the newly-created LIC 9099 form uses the same control number previously used on the initial LIC 9099 report before the delay.

Documenting technical violation allegations

When an allegation of a **technical violation** is substantiated by the Licensing Program Analyst, the allegations and findings must be documented on a separate Complaint Investigation Report (LIC 9099) form.

Each technical violation allegation substantiated during the investigation

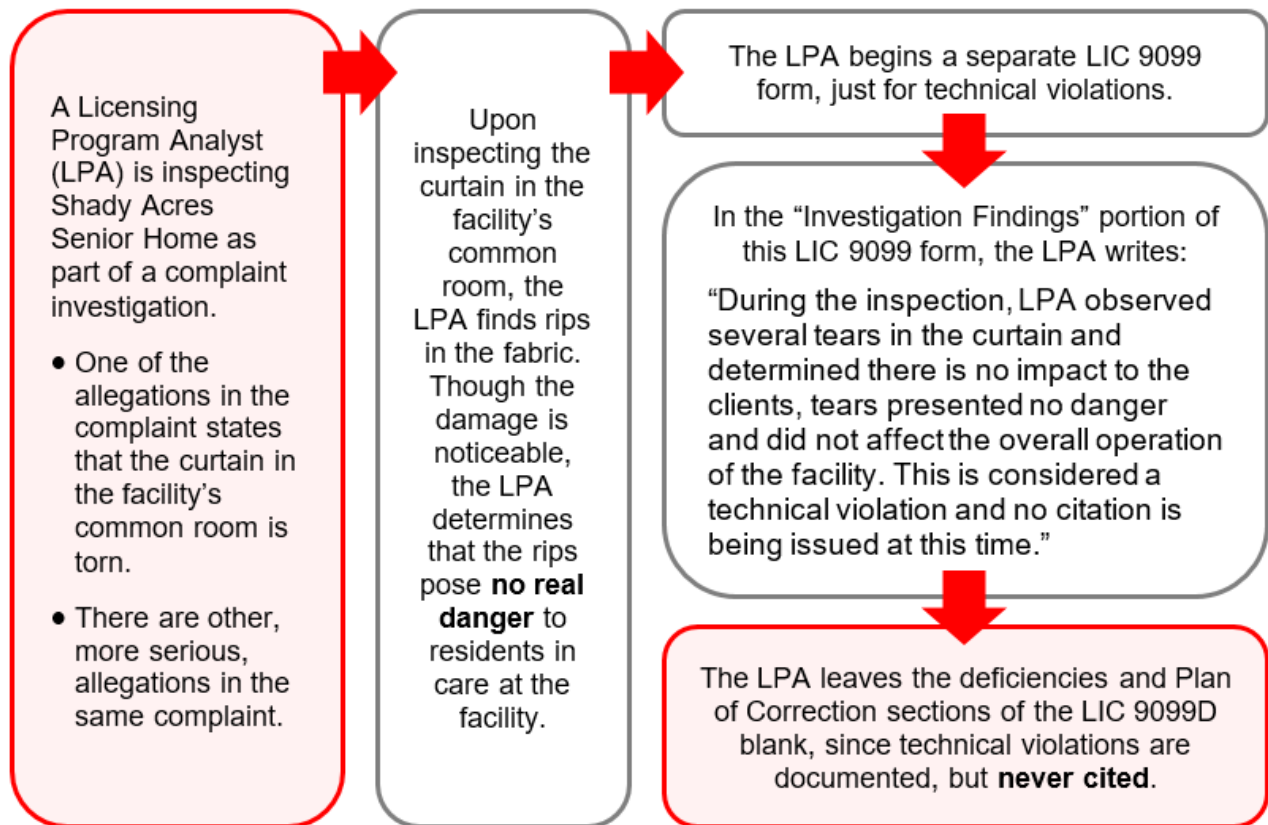
- **will not be** cited as a deficiency, and
 - **will be** noted on the Complaint Investigation Report (LIC 9099) under the Investigation Findings section as a technical violation.
-

Continued on next page

3-3252: Writing a Complaint Investigation Report, Continued

**Example:
documenting
technical
violation
allegations**

The graphic below illustrates the process of documenting technical violation allegations as part of a complaint investigation.



**Are technical
violations ever
cited?**

It is sometimes possible for items previously recorded as technical violations to rise to a higher level of risk. The Licensing Program Analyst may find this to be the case in situations where there is

- evidence of deterioration of the overall condition of a facility
- impacts on persons in care, or
- impacts on a facility's plan of operation.

In these more serious situations, items previously documented as technical violations must be cited at the risk level (Type A or B) they now actually represent to persons in care at the facility.

Chapter 4

Other Forms and Reports

Overview

Contents

This chapter describes additional forms – besides the Facility Evaluation Report (LIC 809) and Complaint Investigation Report (LIC 9099) – that are commonly used in the documentation process.

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3-3300: Inspection/Investigation Forms

Overview

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Confidentiality of forms

When an inspection has been concluded, the Licensing Program Analyst (LPA) must leave a copy of all publicly available documentation with the facility representative. This can be summed up as follows:

- Only the Detail Supportive Information (LIC 812) form is always considered confidential, and therefore **never** left with the facility representative.
- The Confidential Names (LIC 811) form is **usually** left with the facility representative, since the information recorded therein is often required to complete a Plan of Correction, unless the LPA determines that doing so would place persons in care at risk. Additionally, if the complainant in a complaint investigation requests anonymity, the LPA must ensure that such anonymity is maintained when documenting the investigation.
- A copy of all other forms used to document the inspection is **always** left with the facility representative when the inspection is concluded.

Continued on next page

Overview, Continued

Use of forms

The table below gives a shorthand account of when various supporting forms may be used to document an inspection or investigation.

Form Name	Used For
Contact Sheet (LIC 185)	Listing the efforts of licensing staff to contact a particular facility.
Confidential Names (LIC 811)	Recording the actual names of persons in care for whom an identifier reference has been used in publicly available documentation.
Detail Support Information (LIC 812)	Recording confidential or supplemental details of the inspection or investigation.
Photography Report (LIC 813)	Identifying photographs included as documentation.
Declaration (LIC 855)	Recording a testimonial statement from an adult witness.
Children's Record Review (Child Care Center) (LIC 857)	Recording details found in the records of a Child Care facility.
Client/Resident Records Review (Residential) (LIC 858)	Recording details found in the records of an Adult or Senior Care facility, or a Children's Residential facility.
Review of Staff/Volunteer (LIC 859)	Recording details of a review of a facility's staff and volunteers, including a summary of individual employee records which shows details of each employee's service at the facility.

3-3301: Contact Sheet (LIC 185)

What is the Contact Sheet (LIC 185)?

The **Contact Sheet (LIC 185)** form is used to document contact efforts made by licensing staff for a given facility. Each time a contact is made, the date and details are recorded on this form, which is kept in the facility file.

**Example:
LIC 185**

The graphic below shows the Contact Sheet (LIC 185).

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING

CONTACT SHEET

This form is intended to document contacts concerning the facility identified below. Such contacts may include notification of corrections by the facility. Limit information to public information. file on the top right side of the facility folder. Enter t/c (telephone call) or o/v (other visit) and the contact date in the first column. Under Summary of Contacts enter relevant information including action taken and follow up. Enter initial and last name after each entry.

FACILITY NAME _____ FACILITY NUMBER _____

TYPE CONTACT/ DATE (t / c, o / v)	SUMMARY OF CONTACTS

**Example
notes: LIC 185**

The table below details items highlighted in the *LIC 185* graphic.

Item	Description
A: basics	The facility name and facility number.
B: type and date	<i>Type Contact</i> will be either “t/c” for a telephone call , or “o/v” (for “other visit”) for any other type of contact (including email). <i>Date</i> of the contact is also recorded here.
C: summary	The contact details, including actions taken, are briefly described in the Summary of Contacts . Each entry also must show the first initial and last name of the Licensing Program Analyst who handled the contact.

3-3302: Confidential Names (LIC 811)

What is the Confidential Names (LIC 811) form?

The **Confidential Names (LIC 811)** form is used to record the actual names of persons in care for whom an **identifier** reference has been used in publicly available documentation, such as a Facility Evaluation Report (LIC 809).

Example:
LIC 811

The graphic below shows the top of the Confidential Names (LIC 811) form.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office, 770 THE CITY DR., SUITE 7100
ORANGE, CA 92668

CONFIDENTIAL NAMES

California Statutes and Code of Regulations require that the names of clients/residents not be specified on public documents. The following is a list of clients referenced in the licensing report identified below.

Date of Field Visit: 06/17/2017 **Licensing Report Date (LIC 809):** 06/17/2017
Date Licensing Report Was Issued/Given To Licensee (Facility Representative): 06/17/2017
Facility Name: SHADY ACRES SENIOR HOME **Facility Number:** 193600162

Ref. #	Name of Client	Date of Birth	Address/Location	Comment
R1	1 Evelyn Cox	02/15/1936	1 123 MAIN STREET	1
	2 RESIDENT		2 Somewhere, CA 95600	2
	3		3	3
	4		4	4
R2	1 Colleen Powell	08/30/1934	1 123 MAIN STREET	1
	2 RESIDENT		2 Somewhere, CA 95600	2
	3		3	3
	4		4	4

Example
notes: LIC 811

The table below details items highlighted in the *LIC 811* graphic.

Item	Description
A: basics	The facility name , the facility number , and the relevant date or dates.
B: identifier code	The code used to represent a given individual in the public report is entered in the left column.
C: identifying details	Private details, including name , date of birth , address , and any comments by the Licensing Program Analyst, aligned with the corresponding identifier code.

Continued on next page

3-3302: Confidential Names (LIC 811), Continued

Who should be protected? Any person identified in a public document, other than a facility licensee, administrator, or their representative, should be referred to using an **identifier** code.

Identifier codes An **identifier** is a coded alias that provides for confidentiality of an individual. This alias can consist of letters, numbers, or a combination of both.

Generally, the Licensing Program Analyst (LPA) is free to use whatever identifiers work to preserve the privacy of individuals in the report. However, there are guidelines for the use of identifiers that the LPA should follow. For more information on the use of identifiers, see 3-3150: Components of a Citation.

Using the LIC 811 When deficient practice at a facility involves persons in care that must be included as part of an inspection report, the Licensing Program Analyst must take care to preserve those individuals' privacy in the publicly available documents of the case.

This is done by following the method described in the table below.

Step	Action
1	An identifier code (such as "R1" for the first resident mentioned in the report) is used when filling in the public report forms, rather than using the person's actual name.
2	A statement is added in the report's narrative section, referencing the corresponding Confidential Names (LIC 811) form by the Licensing Report Date (the date the inspection was conducted and filed).
3	On the LIC 811 form, the identifier code is entered in the leftmost column, followed by that person's identifying details in the columns to the right.
4	The licensee, courts and licensing staff now have a record of which individuals are included in the case narrative, without the identity of those individuals being published in the public report.

Continued on next page

3-3302: Confidential Names (LIC 811), Continued

Licensing Report Date

The **Licensing Report Date** is featured at the top of the Confidential Names (LIC 811) form. This field should be completed to reflect the date that the corresponding public documents of the inspection were created.

Note: On the LIC 811 form, there is a notation suggesting that the Licensing Report Date field is only for the date of a Facility Evaluation Report (LIC 809), but it should show the date of the corresponding Complaint Investigation Report (LIC 9099) when the LIC 811 is used in conjunction with a complaint investigation.

Can confidential information be made public?

In court proceedings, an Administrative Law Judge may determine that confidential documents be made part of the public record.

Important! The Licensing Program Analyst must therefore be clear with interview subjects and others who might request confidentiality that confidential status could subsequently be removed by a court of law.

Completing the LIC 811

When the Confidential Names (LIC 811) form has been completed, the Licensing Program Analyst must sign and date the bottom. Copies of the document are then

- normally left with the facility representative, along with the other inspection documentation (but see “Leaving a copy of the LIC 811” in this section), and
 - placed in the confidential section of the facility file.
-

Leaving a copy of the LIC 811

Important! Usually, a copy of the completed Confidential Names (LIC 811) form is left with the licensee, administrator, or facility representative, to aid in correction of any deficiencies found at the facility. But in cases where the Licensing Program Analyst (LPA) determines that doing so may place a person in care at risk, the LPA must **not** leave a copy. When the LIC 811 is not left with the licensee, other materials, such as the Facility Evaluation Report (LIC 809), must contain sufficient information to allow the licensee to make any necessary corrections.

Example: The licensee is the subject of a complaint alleging abuse of a person in care. It would place the person in care at risk if a copy of the LIC 811 form identifying the accuser by name is left with his or her alleged abuser. In this case, the LPA must **not** leave a copy.

3-3303: Detail Supportive Information (LIC 812)

What is the Detail Supportive Information (LIC 812) form?

The ***Detail Supportive Information (LIC 812)*** form is used in conjunction with a Facility Evaluation Report (LIC 809) or Complaint Investigation Report (LIC 9099) to capture the details of an inspection or investigation.

The LIC 812 form is useful when a more detailed explanation is needed to support the Licensing Program Analyst's decisions, or to document information that is needed for the record, but not essential for the correction of deficient practice. It is also used for recording confidential information, such as names that were replaced by ***identifiers*** in public documents.

Confidentiality of the LIC 812

The Detail Supportive Information (LIC 812) form is **always** considered a confidential document, and is **never** provided to the facility representative upon conclusion of an inspection or investigation.

Important! See "Confidentiality toggle" in this section for rare exceptions to this policy).

Use of identifiers on the LIC 812

Because it is **always** filed as confidential (except in rare instances, see "Confidentiality toggle" in this section), the Detail Supportive Information (LIC 812) form is commonly used to record the names of individuals which are shown as ***identifiers*** on associated public documents, such as a Facility Evaluation Report (LIC 809) or Complaint Investigation Report (LIC 9099).

In turn, identifiers are **never** used on the LIC 812.

Confidentiality toggle

The FAS version of the Detail Supportive Information (LIC 812) form is equipped with a "toggle" control that allows the user to switch the form status from confidential to public. This toggle exists for **rare** occasions when the Licensing Program Analyst (LPA) makes use of the LIC 812 to document information that will be shared with the licensee.

Example: While conducting a facility inspection, the LPA is informed by the licensee that construction is planned at the facility site. The LPA may choose to use an LIC 812 to record observations regarding anticipated safety concerns as a result of the construction that may impact the client/resident population, and then share these observations with the licensee. In this case, this particular LIC 812 must be toggled to "public" status to distinguish it as a publicly shared document.

Continued on next page

3-3303: Detail Supportive Information (LIC 812), Continued

Example: The graphic below shows the top of the Detail Supportive Information (LIC 812) form.

LIC 812

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office, 770 THE CITY DR., SUITE 7100
ORANGE, CA 92868

DETAIL SUPPORTIVE INFORMATION

Annual File Review ← **D**

This form is intended to document information, such as collateral visits, that is relevant to the licensing file but generally not public information, such as conditions contributing to the severity of violations, witnesses to the violations, or other observation from field notes. When used to support the Licensing Report (LIC809) the form should be completed, signed and dated shortly after the visit. This assures accuracy and completeness of the detail of the public report.

CONFIDENTIAL

FACILITY NAME: SHADY ACRES SENIOR HOME
FACILITY NUMBER: 193600017
DATE(S) OF CONTACT: 06/17/2017
COLLATERAL VISIT? No

1 Five resident records were reviewed with the Administrator, John Doe, on 6/17/17 at 9:15 a.m. The five residents
2 had a diagnosis of dementia. Marla Graves, James Hill, and Sergio Malone had current medical reappraisals. Their
3 doctor was Dr. Selmy.
4
5 Evelyn Cox's most current medical reappraisal was 5/14/15, and Colleen Powell's most current reappraisal was
6 4/2/15. Their doctor was Dr. Hugo.
7
8 John Doe verified the dates of Evelyn and Colleen's most current medical reappraisals. John stated that Dr. Hugo
9 "left the area and we are in the process of finding a new doctor for those residents. We are currently using the local
10 prompt care for any medical needs of Evelyn and Colleen."
11

Example notes: LIC 812

The table below details items highlighted in the *LIC 812* graphic.

Item	Description
A: basics	The facility name, the facility number and the date of the form entries.
B: field notes	Confidential notes and information.
C: collateral visit	This field will be completed "Yes" if the form is being used to document a collateral visit , and "No" otherwise.
D: page title	Optionally, an organizing topic for the content to be entered on the form. If no title is entered, this space will remain blank.

Continued on next page

3-3303: Detail Supportive Information (LIC 812), Continued

Information that may be recorded on the LIC 812 form

The information recorded on a Detail Supportive Information (LIC 812) form is not filed as part of the public record, and may include:

- documentation of confidential information, such as witness testimony
- conditions that may affect the seriousness of a violation, or
- any narrative details of observation, interview, or record review that are needed for the record, but not essential for inclusion on the publicly filed report.

Examples: LIC 812 information

The table below gives some examples of how the Detail Supportive Information (LIC 812) can be used to record information.

If ...	Then the LIC 812 can be used to ...
a staff member has agreed to give a confidential interview	record the interview details.
investigating a food complaint	note a person in care's observed frail or underfed condition.
an incident of some complexity occurred during the inspection	explain the events leading up to the situation in greater detail.

What is a collateral visit?

When a visit is made to a location other than the facility that was the subject of an inspection or investigation, it is called a ***collateral visit***.

Collateral visits may be made

- in connection with complaint investigations
- to follow up on incident reports, or
- to gather additional information needed for any type of facility inspection.

Continued on next page

3-3303: Detail Supportive Information (LIC 812), Continued

**Documenting
a collateral
visit**

The form used to document a collateral visit will vary depending on the nature of the facility in which the collateral visit takes place. The table below shows what form should be used to properly document a collateral visit, depending on these circumstances.

If ...	Then ...
the location is licensed by Community Care Licensing Division (CCLD)	the collateral visit should be recorded using a Facility Evaluation Report (LIC 809) form.
the location is not licensed by CCLD (such as a hospital, police station, or private residence)	the collateral visit should be recorded using a Detail Supportive Information (LIC 812) form.

Form names

When electronically saving a Detail Supportive Information (LIC 812) form, the Licensing Program Analyst must not include information in the file name that might compromise the confidentiality of the form's content.

**Example: form
names**

The table below gives an example of how to preserve confidentiality when naming a Detail Supportive Information (LIC 812) form file.

If ...	Then ...
investigating a complaint by Mary Weaver, a person in care at the facility	the LIC 812 form file should not be named "Mary Weaver – Complaint Investigation"; instead, a more generic name for the file should be chosen.

Continued on next page

3-3303: Detail Supportive Information (LIC 812), Continued

Photography permissions

If the Licensing Program Analyst (LPA) feels it is necessary to take a photograph of a person's face to adequately document a situation, permission must first be obtained from the subject of the photo.

The granting of such permission should be recorded on a Detail Supportive Information (LIC 812) form. Documentation of the photo itself is done using a Facility Photography Report (LIC 813).

Important! When filling out the LIC 813 form, the LPA should take care not to reveal confidential information, such as the photography subject's name.

Completing the LIC 812

The Detail Supportive Information (LIC 812) form may be completed by the Licensing Program Analyst (LPA) during or after an inspection or investigation. Often it is completed after the exit conference and is used to organize notes made during the inspection.

When the form has been completed, the LPA must sign and date the bottom. The form is then placed in the confidential section of the facility file.

Inventories

When inspecting a facility, it is sometimes useful to conduct an inventory of a deficient area.

When taking an inventory:

- A Detail Supportive Information (LIC 812) form is used.
- The documentation of the inventory must be accurate and complete (including facility name and address).
- When completed, the form must be signed and dated by the Licensing Program Analyst, just like any other LIC 812 form.

Note: Often, taking an inventory is appropriate if there have been repeated deficiencies documented, and it appears that Community Care Licensing Division will take legal action against the facility.

3-3304: Facility Photography Report (LIC 813)

What is the Facility Photography Report (LIC 813)?

The **Facility Photography Report (LIC 813)** is used to document photos taken as supporting evidence in the course of an inspection or investigation. It is available in the print-only forms library.

**Example:
LIC 813**

The graphic below shows the top of the Facility Photography Report (LIC 813) form.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

FACILITY PHOTOGRAPHY REPORT
This form is intended to identify and clearly explain each photo.

Time : Use 24-hr clock (i.e. 1800 hrs for 6 p.m.)
Photo Description : Briefly explain each picture.
Subject Distance : Important or close up pictures.
Location in Facility : Briefly explain where the picture was taken.
Violation : Reference each deficiency by regulation section number.

DATE: 06/17/2017

FACILITY NAME: SHADY ACRES SENIOR HOME PHOTOGRAPHER NAME: SUSAN JONES

Sequence No.	Time (24-Hr Clock)	Photograph Description	Subject Distance	Location in Facility	Violation(s) (List Section No.)
P10001001	945	Cracked and dirty floor tiles in laundry room	6 feet	Interior laundry room, 1st floor, rear of property	87303(a)(1)

**Example
notes: LIC 813**

The table below details items highlighted in the *LIC 813* graphic.

Item	Description
A: basics	The facility name and the date of the entries on the form.
B: photographer name	The name of the person who actually took the photos is entered in this field. This is most often the Licensing Program Analyst.
C: sequence number	<i>Sequence No.</i> is the identifying code assigned by the camera to the photo or image file name.
D: time stamp	The 24-hour (military clock) time stamp of each photo must be recorded.

(1 of 2)

Continued on next page

3-3304: Facility Photography Report (LIC 813), Continued

**Example
notes: LIC 813,
continued**

The table below details items highlighted in the *LIC 813* graphic.

Item	Description
E: description	A very brief description of the photo should be entered in the <i>Photograph Description</i> field.
F: distance	The distance between the subject and the camera lens should be estimated and entered in this field for context. This can be particularly helpful with close-up images.
G: location	A succinct description of the location on the facility property where the photo was taken should be included for context.
H: violation	Any statutory or regulatory (or Interim Licensing Standards) violation represented in the photo is listed by its corresponding statutory/regulatory reference from the deficient practice statement of the accompanying inspection report.

(2 of 2)

**Documenting
photos**

When a hardcopy version of a photo has been created, all the information from the corresponding entry on the Facility Photography Report (LIC 813) should be printed on an adhesive label and affixed to the back of the photo.

Continued on next page

3-3304: Facility Photography Report (LIC 813), Continued

**Example:
documenting
photos**

The table below gives an example of how a photo of a broken toilet could be documented using the LIC 813 form and a printed label.

If the LIC 813 form contains ...	Then the label also shows ...
<ul style="list-style-type: none"> • Shady Acres Senior Home • 06/17/2017 • file #340041 • taken by Susan Jones • 1200 hours • toilet in client room #3 • toilet has broken top, see #6 on LIC 809 cited, 06/17/2017 	<ul style="list-style-type: none"> • Shady Acres Senior Home • 06/17/2017 • file #340041 • taken by Susan Jones • 1200 hours • toilet in client room #3 • toilet has broken top, see #6 on LIC 809 cited, 06/17/2017.

**Facility
photography**

The Licensing Program Analyst has the right to take photos in the course of a facility inspection or investigation, with the aim of documenting observations for the record.

**Privacy
concerns**

The Licensing Program Analyst must avoid infringing the privacy rights of individuals when using photography. Permission should be obtained before photographing individuals. This is described in the table below.

Important! Even with permission, the use of any photo showing a person's face should be avoided, unless necessary to document deficient practice.

If the photo subject is ...	Then ...
an adult	the permission of the subject must be obtained and documented on a Detail Supportive Information (LIC 812) form.
a minor	the permission of the subject's authorized representative must be obtained and documented on a Detail Supportive Information (LIC 812) form.

Continued on next page

3-3304: Facility Photography Report (LIC 813), Continued

Use of video recording

The use of video recording equipment to document interviews or evidence is prohibited.

Exception: Video recording may be employed in special situations when prior approval has been obtained from the Deputy Director through either

- the Statewide Program Manager, or
- the County Licensing Supervisor.

In such a case, the resulting video should be documented using a Facility Photography Report (LIC 813), observing the same guidelines that apply to the use and documentation of standard photography.

The Declaration (LIC 855) form is used for recording a testimonial statement from an adult witness when conducting an interview is not an option. It is available in the print-only forms library.

The graphic below shows the Declaration (LIC 855) form.

Continued on next page

3-3305: Declaration (LIC 855), Continued**Example
notes: LIC 855**

The table below details items highlighted in the LIC 855 graphic.

Item	Description
A: declarant name	The name of the person giving the statement.
B: statement	The statement taken as testimony is entered on these lines.
C: statement date and location	The date and city in which the statement was taken, entered in the three available blanks as <ul style="list-style-type: none"> • month and day • last two digits of the year, and • city.
D: declarant details	The declarant's address and telephone number.
E: declarant signature	The declarant must sign the document to certify its authenticity.
F: signature date and location	The date and city in which the form was signed by the declarant, entered in the three available blanks as <ul style="list-style-type: none"> • month and day • last two digits of the year, and • city.

**Witness
testimony**

Normally, any interview conducted by a Licensing Program Analyst will be documented on a Detail Supportive Information (LIC 812) form.

However, there are occasions when taking a signed witness statement becomes necessary. This may include situations where

- a very serious deficiency may require legal action
- the witness has limited availability for an interview
- serious circumstances allow insufficient time for the matter to be referred to Investigations Bureau, or
- there is a high probability that a witness may change his or her story if a statement is not taken immediately.

Continued on next page

3-3305: Declaration (LIC 855), Continued

Useless testimony

If the witness is unable to read, then a written statement is of no legal value.

Under these circumstances, the Licensing Program Analyst can only summarize relevant testimony on a Detail Supportive Information (LIC 812) form, as they would with other investigation details.

Using the LIC 855

The use of a Declaration (LIC 855) form to accept a statement is helpful, but not required, as it is permissible to write a declaration on any piece of paper, provided that all the **required components** of the statement are present.

Components of a statement

Whether or not a Declaration (LIC 855) form is used to take a statement, **all** of the following **required components** must be present for a statement to serve as reliable evidence in a case:

The statement must include

- the declarant's name
- the declarant's address and telephone number
- a sentence declaring that the statement has been given voluntarily
- a sentence declaring that, to the knowledge of the declarant, the statement given is true and correct
- the declarant's signature
- the date and the city where the statement is given
- the name of the person to whom the statement is given, and
- the signature of the person to whom the statement is given.

If the statement requires more than one page, then

- the bottom of each page must be signed and sequentially numbered by the Licensing Program Analyst (LPA).

Note: Normally, the person to whom the statement is given will be the LPA, but there may be occasional situations when the Licensing Program Manager or other licensing staff take a declaration, instead.

Continued on next page

3-3305: Declaration (LIC 855), Continued

Writing the statement

Preferably the statement should be written by the declarant. However, if the declarant has difficulty writing, the Licensing Program Analyst may write the statement as dictated by the declarant.

Note: When the declarant does not write the statement, the declarant should be asked to either

- read the statement before signing it, or
 - have the statement read aloud to them before signing it.
-

Multi-page statements

If a statement written on a Declaration (LIC 855) form requires more than one page, then the procedure described in the table below is followed.

Step	Action
1	Begin the statement on the first page of the LIC 855 form.
2	Continue the statement on additional sheets of loose-leaf paper, each of which is signed and sequentially numbered by the Licensing Program Analyst.
3	The second page of the LIC 855 form is placed as the final page of the written statement.
4	All pages are stapled together to form a packet with <ul style="list-style-type: none">• LIC 855 page 1 first• sequentially numbered loose-leaf pages next, then• LIC 855 page 2 last.

Completing the LIC 855

The second page of the Declaration (LIC 855) form is titled “Guidelines for Preparing a Declaration.” This page should be read, signed and dated by the Licensing Program Analyst to complete the LIC 855.

Important! The second page is **not** just an instruction sheet; if it is discarded, then the statement could be ruled invalid if used in a court proceeding.

3-3306: Children's Record Review (Child Care Center) (LIC 857)

What is the Children's Record Review?

The **Children's Record Review (Child Care Center) (LIC 857)** is used to record details found during the record review process at a Child Care Center.

Example: LIC 857

The graphic below shows the top of the Children's Record Review (Child Care Center) (LIC 857).

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CHILDREN'S RECORDS REVIEW (CHILD CARE CENTER)

**CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION**
CCLD Regional Office, 6167 BRISTOL PARKWAY #400
CULVER CITY, CA 90230

INSTRUCTIONS: Click on all documents found during the review. Any unmarked documents shall be recorded on the Facility Evaluation Report (LIC809) with a plan of correction date. File this form in the facility file.

FACILITY NUMBER 193600093 **FACILITY NAME** ABC CHILD CARE

LICENSE REPORT (LIC809) DATE 08/14/2017 **TYPE OF VISIT** Case Management - Deficiencies

AD: ADMISSION AGREEMENT **PR: PHYSICIAN REPORT** **LIC995: PARENT'S RIGHTS RECEIPT**
ID: I.D. AND EMERGENCY INFORMATION **LIC813A: PERSONAL RIGHTS** **IR: IMMUNIZATION RECORD**
HH: HEALTH HISTORY **LIC827: CONSENT FOR EMERG MED TREATMENT** **TB: TB TEST**

REF. #	NAME	DATE OF BIRTH	DATE ENROLLED	TIME	REVIEWED DOCUMENTS
1	John Brown	07/16/2007	05/25/2013	Full	<input checked="" type="checkbox"/> AD <input type="checkbox"/> LIC827 <input type="checkbox"/> ID <input type="checkbox"/> LIC995 <input type="checkbox"/> HH <input type="checkbox"/> IR <input type="checkbox"/> PR <input type="checkbox"/> TB <input type="checkbox"/> LIC813A
COMMENTS ABOUT John Brown: Missing documentation.					
2	Rachel Goodman	12/17/2006	03/14/2011	Full	<input type="checkbox"/> AD <input type="checkbox"/> LIC827

Example notes: LIC 857

The table below details items highlighted in the *LIC 857* graphic.

Item	Description
A: basics	The facility number and facility name.
B: date and type	Date of the licensing report to which the LIC 857 is attached, and the type of inspection being performed.

(1 of 2)

Continued on next page

3-3306: Children's Record Review (Child Care Center) (LIC 857), Continued

**Example
notes: LIC 857,
continued**

The table below details items highlighted in the *LIC 857* graphic.

Item	Description
C: checklist	A system of codes for items that may be found inadequate, and a corresponding checklist to the right of each entry.
D: personal file entry	For each person in care found to have inadequate documentation, an entry is made which includes <ul style="list-style-type: none">• a reference number• name• date of birth• date they were enrolled at the facility, and• terms of their enrollment (full or part-time).
E: comments	A brief description of the inadequacies found for each entry. Comments should work to clarify the reason certain boxes were checked to the right of the entry.

(2 of 2)

Continued on next page

3-3306: Children's Record Review (Child Care Center) (LIC 857), Continued

**Checklist
codes**

When filling out a Children's Record Review (Child Care Center) (LIC 857), the Licensing Program Analyst may check the coded boxes to the right of each personal file entry in the form to indicate that an item is both present and current in that person's record. The table below lists the meanings of the nine codes included on the form.

Code	Meaning
AD	Admission Agreement
ID	Identification and Emergency Information
HH	Health History Report
PR	Physician's Report
LIC613A	Personal Rights
LIC627	Consent for Emergency Medical Treatment
LIC995	Notification of Parent's Rights
IR	Immunization Record
TB	Tuberculosis Test

3-3307: Client/Resident Records Review (Residential) (LIC 858)

What is the Client/Resident Records Review?

The *Client/Resident Records Review (Residential) (LIC 858)* is used to record details found during the record review process at an Adult or Senior Care facility or a Children's Residential facility.

**Example:
LIC 858**

The graphic below shows the top of the Client/Resident Records Review (Residential) (LIC 858).

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY					CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1515 CLAY STREET, STE. 310 OAKLAND, CA 94612		
CLIENT/RESIDENT'S RECORDS REVIEW (RESIDENTIAL)							
INSTRUCTIONS: Click on all documents found during the review. Any unmarked documents shall be recorded on the Facility Evaluation Report (LIC809) with a plan of correction date. File this form in the facility file.							
FACILITY NUMBER 193600093				FACILITY NAME XYZ RESIDENCE			
LICENSE REPORT (LIC809) DATE 08/14/2017				TYPE OF VISIT Case Management - Deficiencies			
AD: ADMISSION AGREEMENT MA: MEDICAL ASSESSMENT CF: CONSENT FORMS WR: WEIGHT RECORD		ID: I.D. AND EMERGENCY INFORMATION ANS: APPRAISAL & NEEDS SERVICE PLAN IR: IMMUNIZATION RECORD TB: TB TEST		CSDMR: CENTRALLY STORED MEDICATION DESTRUCTION RECORD SCR: SAFEGUARDS FOR CASH RESOURCES SPV: SAFEGUARDS FOR PROPERTY/VALUABLES LIC813, LIC813B, OR LIC813C: PERSONAL RIGHTS CRI: CASH RESOURCE INFO			
REF. #	NAME	DATE OF BIRTH	DATE OF ADMISSION	DISCHARGE DATE	REVIEWED DOCUMENTS		
	AMB	SOURCE OF INCOME	CRI DATE	BALANCE			
1	Wendy Lee	05/12/1956	07/14/2017	08/18/2017	<input type="checkbox"/> AD <input type="checkbox"/> ANS <input type="checkbox"/> SPV <input checked="" type="checkbox"/> MA <input type="checkbox"/> IR <input type="checkbox"/> LIC813 <input checked="" type="checkbox"/> CF <input type="checkbox"/> TB <input type="checkbox"/> LIC813B <input type="checkbox"/> WR <input type="checkbox"/> CSDMR <input type="checkbox"/> LIC813C <input type="checkbox"/> ID <input type="checkbox"/> SCR <input type="checkbox"/> CRI		
COMMENTS ABOUT Ref #1: Physician's Report missing physician's signature.							
2	Edger Price	05/14/1945	08/14/2017	08/18/2017	<input type="checkbox"/> AD <input type="checkbox"/> ANS <input checked="" type="checkbox"/> SPV <input type="checkbox"/> MA <input type="checkbox"/> IR <input type="checkbox"/> LIC813 <input checked="" type="checkbox"/> CF <input checked="" type="checkbox"/> TB <input type="checkbox"/> LIC813B <input type="checkbox"/> WR <input type="checkbox"/> CSDMR <input type="checkbox"/> LIC813C		
COMMENTS ABOUT Ref #2: Documents missing info.							

Continued on next page

3-3307: Client/Resident Records Review (Residential) (LIC 858), Continued

**Example
notes: LIC 858**

The table below details items highlighted in the LIC 858 graphic.

Item	Description
A: basics	The facility number and facility name.
B: date and type	Date of the licensing report to which the LIC 858 is attached, and the type of inspection being performed.
C: checklist	A system of codes for items that may be found inadequate, and a corresponding checklist to the right of each entry.
D: personal file entry, row 1	For each person in care found to have inadequate documentation, an entry is made which includes <ul style="list-style-type: none"> • a reference number • name • date of birth • date they were admitted to the facility, and • date they are to be discharged from the facility, when applicable.
E: personal file entry, row 2	For each person in care found to have inadequate documentation, the entry is continued to include <ul style="list-style-type: none"> • whether or not the person is ambulatory • the person's source of income • the date the subject's cash resource information was entered, and • the person's cash resource balance.
F: comments	A brief description of the inadequacies found for each entry. Comments should work to clarify the reason certain boxes were checked to the right of the entry.

Continued on next page

3-3307: Client/Resident Records Review (Residential) (LIC 858), Continued

Checklist codes

When filling out a Client/Resident Records Review (Residential) (LIC 858), the Licensing Program Analyst may check the coded boxes to the right of each personal file entry in the form to indicate that an item is both present and current in that person's record. The table below lists the meanings of the 15 codes included on the form.

Code	Meaning
AD	Admission Agreement
MA	Medical Assessment
CF	Consent Forms
WR	Weight Record
ID	Identification and Emergency Information
ANS	Appraisal and Needs Service Plan
IR	Immunization Record
TB	Tuberculosis Test
CSMDR	Centrally Stored Medication/Destruction Record
SCR	Record of Safeguarded Cash Resources
SPV	Safeguards for Property and Valuables
LIC613	Personal Rights: Adult Residential Care Facilities
LIC613B	Personal Rights: Children's Residential Facilities
LIC613C	Personal Rights: Residential Care for the Elderly
CRI	Cash Resources Information

3-3308: Review of Staff/Volunteer Records (LIC 859)

What is the Review of Staff/Volunteer Records?

The **Review of Staff/Volunteer Records (LIC 859)** form is used to record details found in a review of staff records during a facility inspection or investigation.

**Example:
LIC 859**

The graphic below shows the top of the Review of Staff/Volunteer Records (LIC 859) form.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY
REVIEW OF STAFF/VOLUNTEER RECORDS
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
 CCLD Regional Office, 1000 CORPORATE CNTR DR. 200-B
 MONTEREY PARK, CA 91754

INSTRUCTIONS: Click on all documents found during the Facility Evaluation Report (LIC809) with a plan of correction. If unmarked documents shall be recorded on this form in the facility file.

FACILITY NUMBER: 193600093
 FACILITY NAME: ABC CHILD CARE
 LICENSE REPORT (LIC809) DATE: 08/14/2017
 TYPE OF VISIT: Case Management - Deficiencies

1st: FIRST AID CERTIFICATE
 FPCL/EXMP: FINGERPRINT CLEARANCES/EXEMPTIONS
 ED: EDUCATION VERIFICATION
 LIC198: CHILD ABUSE INDEX
 LIC501: PERSONNEL RECORD OR JOB APPLICATION
 LIC503: HEALTH SCREENING
 LIC508: CRIMINAL RECORD STATEMENT
 LIC9052: EMPLOYEE RIGHTS
 MTV: MEDICAL TRAINING VERIFICATION
 TB: TB TEST

REF#	EMPLOYEE or VOLUNTEER NAME	POSITION	DATE EMPLOYED	REVIEWED DOCUMENTS
01	Jean Selmy	Caregiver	05/25/2013	<input type="checkbox"/> 1ST <input checked="" type="checkbox"/> FPCL/EXMP <input type="checkbox"/> ED <input type="checkbox"/> LIC198 <input type="checkbox"/> LIC501 <input type="checkbox"/> LIC503 <input type="checkbox"/> LIC9052 <input checked="" type="checkbox"/> MTV <input type="checkbox"/> TB
COMMENTS ABOUT Ref #01: The LIC 9052 is missing from staff file.				
02	Lawrence Yee	Administrator	09/14/2002	<input checked="" type="checkbox"/> 1ST <input type="checkbox"/> LIC503

COMMENTS ABOUT Ref #02:

**Example
notes: LIC 859**

The table below details items highlighted in the LIC 859 graphic.

Item	Description
A: basics	The facility number and facility name.
B: date and type	Date of the licensing report to which the LIC 859 is attached, and the type of inspection being performed.
C: checklist	A legend of codes for items that may be found inadequate, and a corresponding checklist to the right of each entry.

(1 of 2)

Continued on next page

3-3308: Review of Staff/Volunteer Records (LIC 859), Continued

**Example
notes: LIC 859,
continued**

The table below details items highlighted in the LIC 859 graphic.

Item	Description
D: personal file entry	For each employee or volunteer found to have inadequate documentation, an entry is made which includes <ul style="list-style-type: none"> • a reference number • name of employee or volunteer • position at the facility, and • date they began working at the facility.
E: comments	A brief description of the inadequacies found for each entry. Comments should work to clarify the reason certain boxes were checked to the right of the entry.

(2 of 2)

**Checklist
codes**

When filling out a Review of Staff/Volunteer Records (LIC 859) form, the Licensing Program Analyst may check the coded boxes to the right of each personal file entry in the form to indicate that an item is both present and current in that person's record. The table below lists the meanings of the 10 codes included on the form.

Code	Meaning
1ST	First Aid Certificate
FPCL/EXMP	Fingerprint Clearances/Exemptions
ED	Education Verification
LIC198	Child Abuse Index
LIC501	Personnel Record or Job Application
LIC503	Health Screening
LIC508	Criminal Record Statement
LIC9052	Employee Rights
MTV	Medical Training Verification
TB	Tuberculosis Test

Chapter 5

Resolving Deficient Practice Citations

Overview

Contents

This chapter will address documenting the processing of cited noncompliance at facilities, including Plans of Correction and verification of corrective action.

Topic	See Page
3-3400: Plan of Correction	118
3-3450: Clearing the Deficiency	130

3-3400: Plan of Correction

Overview

Contents

This section explains the Plan of Correction, including the process of creating one and how a Plan of Correction's due date may be extended under certain circumstances.

Topic	See Page
3-3401: Plan of Correction – Authority	121
3-3402: Creating a Plan of Correction	124
3-3403: Effective Plans of Correction	127
3-3404: Extending a Plan of Correction	130

3-3401: Plan of Correction – Authority

What is a Plan of Correction?

The **Plan of Correction** (POC) is a written plan, created in response to one or more deficient practices, by which licensees and administrators can communicate to the licensing agency and the public their intentions of bringing their facility into substantial compliance.

Authority: HSC

Authority for the Plan of Correction is referenced in the California **Health and Safety Code** (HSC), **Division 2**. The table below lists specific sections where this authority is described.

Chapter	Section Number
3. California Community Care Facilities Act	§ 1534.1(a)
3.01 Residential Care Facilities for Persons with Chronic Life-Threatening Illness	§ 1568.0715(a)
3.5 Day Care Centers	§ 1596.98(c)
3.6 Family Day Care Homes	§ 1597.56(c)

Authority: CCR

Authority for the Plan of Correction is referenced in the **California Code of Regulations** (CCR), **Title 22, Division 6**. The table below lists specific sections where this authority is described.

(1 of 2)

Chapter	Section Number	Section Language
1. General Licensing Requirements	§ 80052(b)	“Prior to completion of an evaluation or other licensing visit, the licensee, administrator, operator, or other person in charge of the facility shall meet with the evaluator to discuss any deficiencies noted, to jointly develop a plan for correcting each deficiency, and to acknowledge receipt of the notice of deficiency.”

Continued on next page

3-3401: Plan of Correction – Authority, Continued

Authority:
CCR,
continued

Authority for the Plan of Correction is referenced in the **California Code of Regulations (CCR), Title 22, Division 6**. The table below lists specific sections where this authority is described.

(2 of 2)

Chapter	Section Number	Section Language
3. Adult Day Programs	§ 82052(b)	“Prior to completion of an evaluation or other licensing visit, the licensee, administrator, operator, or other person in charge of the day program shall meet with the evaluator to discuss any deficiencies noted, to jointly develop a plan for correcting each deficiency, and to acknowledge receipt of the notice of deficiency.”
8. Residential Care Facilities for the Elderly (RCFE)	§ 87756(d)	“Prior to completion of a visit, evaluation or investigation, the evaluator shall meet with the licensee, administrator, operator, or other person in charge of the facility to discuss any deficiencies noted. At the meeting, a plan for correcting each deficiency shall be developed and included in the notice of deficiency.”
8.5 Residential Care Facilities for the Chronically Ill	§ 87852(b)	“Prior to completion of an evaluation or other licensing visit, the licensee, administrator, or other person in charge of the facility shall meet with the evaluator to discuss any deficiencies noted, to jointly develop a plan for correcting each deficiency, and to acknowledge receipt of the notice of deficiency.”
9.5 Foster Family Homes	§ 89252(b)	“Prior to completion of a visit, the caregiver or other person in charge of the home shall meet with the licensing agency to discuss any deficiencies noted, jointly develop a plan for correcting each deficiency, and acknowledge receipt of the notice of deficiency.”

Continued on next page

3-3401: Plan of Correction – Authority, Continued

**Authority:
CCR, Child
Care Centers**

Authority for the Plan of Correction is referenced in the **California Code of Regulations (CCR), Title 22, Division 12**. The table below shows the section where this authority is described.

Chapter	Section Number	Section Language
1. Child Care Center General Licensing Requirements	§ 101193(b)	“Prior to completion of an evaluation or other licensing visit, the person in charge of the child care center shall meet with the evaluator to discuss any deficiencies noted, to jointly develop a plan for correcting each deficiency, and to acknowledge receipt of the notice of deficiency.”

3-3402: Creating a Plan of Correction

When is a Plan of Correction created?

During the exit interview of an inspection in which the Licensing Program Analyst (LPA) issues citations, the facility licensee or administrator must devise a means of correcting all cited deficiencies. Taken together, these corrective actions constitute the Plan of Correction (POC) for a given inspection.

Each POC will be

- developed jointly by the facility representative and the LPA
 - contain corrective actions which are verifiable and measurable, and
 - contain reasonable dates by which deficiencies will be corrected.
-

Documenting a Plan of Correction

Normally, a Plan of Correction will be written on the Deficiencies page of the Facility Evaluation Report (LIC 809D) or Complaint Investigation Report (LIC 9099D) in the *Plan of Corrections (POC)* column.

Each corrective action should be written next to the corresponding violation in the report form's *Deficiencies* column, and the **due date** indicated.

Alternative to including the POC on the report form

Rather than placing the Plan of Correction (POC) on the Facility Evaluation Report (LIC 809D) or Complaint Investigation Report (LIC 9099D), it is sometimes acceptable for the facility representative to submit a written POC by a specific date agreed upon with the Licensing Program Analyst (LPA). If so, this fact should be noted on the report form.

Note: Whether or not the POC is entered into the report form during the exit interview, the LPA **must** still document the **due date** for correction of each deficiency on the report form.

The Analyst's role in developing a POC

The Licensing Program Analyst (LPA) is expected to provide additional consultation and assistance with the development of the Plan of Correction (POC) if the facility representative requires it.

Important! The LPA **must not** develop the POC merely upon the facility representative's request if the facility representative is capable of jointly developing the POC.

Continued on next page

3-3402: Creating a Plan of Correction, Continued

Filing the Plan of Correction

A Plan of Correction (POC) is normally filed in the public section of the licensing office's facility files.

Important! When a client's or resident's name or other confidential information is included in the POC, the POC must be placed in the **confidential** section of the facility file. However, a Public Records Act request may lead to confidential documents becoming public (with confidential information redacted).

Determining due dates

When selecting dates by which corrective action is due, the Licensing Program Analyst must remind the facility representative that factors for determining the correction date are specified in regulations. (See "Authority: CCR," "Authority: CCR, continued," and "Authority: CCR, Child Care Centers" in 3-3600: Plan of Correction.)

Four factors that determine due dates

In accordance with regulations for most licensing categories, **four factors** must be considered by the Licensing Program Analyst in determining a date for correcting a deficiency.

Item	Description
1: seriousness	The potential hazard presented by, or the seriousness of, the deficiency.
2: extent	The number of clients/residents/children affected.
3: readiness	The availability of equipment or personnel necessary to correct the deficiency.
4: time required	The estimated time necessary for delivery and installation of any necessary equipment.

Continued on next page

3-3402: Creating a Plan of Correction, Continued

**Family Child
Care Home
statute**

In contrast to other licensing categories, Family Child Care Home statute requires “a reasonable length of time for compliance.”

Also, Family Child Care Home statute lists the following factors to consider in jointly developing the Plan of Correction.

Item	Description
1: seriousness	The gravity of the violation.
2: history	The history of previous violations.
3: threat	The possibility of a threat to the health or safety of any child in the facility.
4: extent	The number of children affected.

**Acceptability
of due dates**

A Plan of Correction must contain achievable and appropriate due dates.

Important! It is **not acceptable** to simply state “all corrections will be made in 30 days” on the report. Each correction must occur as soon as reasonably possible.

3-3403: Effective Plans of Correction

Developing an effective plan

In the joint development of the Plan of Correction (POC), the Licensing Program Analyst (LPA) may offer suggestions to the facility representative regarding their POC in order to create an effective plan.

The following questions and guidelines should be considered to ensure POC are quality products.

Question	Notes
Is the POC meaningful?	The plan must adequately address correction of the deficiency. If it does not, it is not a meaningful plan.
Is this a reasonable method to bring the facility back into compliance?	Ideally, the plan must both correct the deficiency and keep the facility in compliance long term.
Is this a training opportunity for the facility?	In some situations, staff training can be an effective part of correction.
How will the facility use this POC to improve compliance?	Ideally, the plan must do more than just correct immediate issues if recurring instances of deficient practice exist.
Is the POC <i>measurable</i> ?	The LPA must be able to determine how the licensee will attain compliance.
Is the POC <i>verifiable</i> ?	The plan must indicate what acceptable evidence will be required to prove that the deficiency has been corrected and must state whether verification will be done through a facility inspection, a licensing office meeting, or by other means.

Continued on next page

3-3403: Effective Plans of Correction, Continued

**Example:
measurability**

The table below gives an example of a measurable plan compared to a plan that is not measurable.

Stated in the Plan of Correction	Explanation
"I will talk to staff about it."	Not measurable: The plan lacks specific details that convey how compliance will be met
"All staff will be required to attend personal rights training within the next 14 days."	Measurable: The plan includes measurable steps that can be checked for completion.

**Example:
verifiability**

The table below gives an example of a verifiable plan compared to a plan that is not verifiable.

Stated in the Plan of Correction	Explanation
"The window can be fixed."	Not verifiable: The agreement will not require the licensee to comply in a specific fashion.
"The window will be fixed and photographs of the repairs submitted to the licensing office by the appointed due date."	Verifiable: The agreement does require the licensee to comply in a specific fashion.

Continued on next page

3-3403: Effective Plans of Correction, Continued

Specifying verifiable evidence

The Plan of Correction must specify how proof or evidence will be submitted for verification.

Some acceptable forms of verification include

- a Plan of Correction facility inspection by the Licensing Program Analyst (LPA)
- an office meeting with the LPA where evidence will be presented by the licensee
- submitting evidence by mail or delivery service
- physical drop-off of agreed-upon evidence, or
- submitting evidence by email.

Note: If proof or evidence is to be sent in by the licensee, the agreement must be clear as to the nature and substance of that evidence (such as specific receipts, photos, or copies of documents).

Inspection vs. alternatives

When determining whether or not an inspection is required versus allowing verification by other means, the Licensing Program Analyst must consider the potential risk to clients in care.

An example of this determination is given in the table below.

If ...	Then ...
a facility has a history of overcapacity or staff-to-client ratio issues	it is important to perform a Plan of Correction inspection of the facility to ensure they have followed their Plan of Correction and will be able to maintain compliance.

Acceptability of a Plan of Correction

While the facility representative will devise the Plan of Correction (POC), each POC is **subject to Department approval**.

Using the information contained in this section, the facility representative and the Licensing Program Analyst can avoid delays and misunderstandings while bringing a licensee into compliance.

3-3404: Extending a Plan of Correction

Permissibility of extending a due date

When a facility is likely to miss a Plan of Correction (POC) due date, it is possible for a Licensing Program Analyst (LPA) to extend the due date under certain circumstances.

The tables below outlines how and when a due date may be extended.

Deficiency Type	Procedure
Type A	<ol style="list-style-type: none"> 1. The facility must resolve the immediate risk situation. 2. If there is not enough time before the established due date to reasonably carry out the POC for the deficiency in question, the licensee may request an extension from the LPA. 3. A request to extend the POC due date is submitted by the LPA to a higher-level staff person, normally the Licensing Program Manager (LPM), for approval. 4. A review of the request must be conducted by the higher-level staff person. 5. If the request is approved, an extension of the due date may be granted for up to 30 days.
Type B	<ol style="list-style-type: none"> 1. If there is not enough time to reasonably complete the POC for the deficiency, the licensee may request an extension from the LPA. 2. A request to extend the plan of correction due date is submitted by the LPA to the LPM for approval. 3. If the request is approved, an extension of the due date may be granted for up to 30 days.

Timeliness of extension requests

An extension for a Plan of Correction (POC) will not be considered, unless requested either

- **prior** to the POC due date; or
- **within 10 working days** of the receipt of the POC notice.

Continued on next page

3-3404: Extending a Plan of Correction, Continued

**Documenting
the extension**

The Licensing Program Analyst must document any Plan of Correction (POC) due date extension and file this record with the Facility Investigation Report (LIC 809) or Complaint Investigation Report (LIC 9099) containing the due date being extended.

The steps to document an extension of a POC due date are shown in the table below.

Step	Action
1	To create a record of the extension, select either <ul style="list-style-type: none">• a Deficiency/Penalty Review (LIC 178) form, or• a blank letter template using the Department letterhead.
2	On the form or letter, record the <ul style="list-style-type: none">• violation and original due date for correction• date of the extension request• name of the requestor• new due date, and• factors pertaining to the decision of the extension.
3	Provide a copy of the extension form/letter to the licensee or facility representative.
4	Place a copy of the extension form/letter in the facility file attached to the original licensing report.

**Instructions
for county
licensing staff**

When recording an extension of a Plan of Correction due date, county staff must document the date of request, the requestor, the new due date and the factors pertaining to the decision of the extension on a Deficiency/Penalty Review (LIC 178) form.

A copy of the completed form is then provided to the licensee or facility representative and a copy placed in the facility file.

3-3450: Clearing the Deficiency

Overview

Contents

This section covers the possible ways a licensee can remedy a deficiency, and the steps a Licensing Program Analyst can take if a licensee fails to follow through on the Plan of Correction.

Topic	See Page
3-3451: Making a Plan of Correction Inspection	133
3-3452: Holding an Office Meeting	135
3-3453: Submitting Proof of Correction	137
3-3454: Self-Certification	144
3-3455: Inadequate Correction and Further Action	146

3-3451: Making a Plan of Correction Inspection

What is a Plan of Correction inspection?

A **Plan of Correction inspection** is an inspection conducted at the facility by the Licensing Program Analyst specifically to verify that conditions and practices previously cited have been corrected as agreed in the licensee's Plan of Correction.

How to clear a deficiency

After any inspection that includes the issuance of a citation, the Licensing Program Analyst (LPA) must follow-up to clear any deficiency.

During the development of the Plan of Correction, it is established that the LPA will verify correction of each deficiency by either

- making a Plan of Correction inspection
- holding an office meeting with the licensee, or
- accepting some agreed-upon proof of correction from the licensee.

Note: At the LPA's option, a Plan of Correction inspection can always be conducted, even when other means of verification are used.

Requirements of a Plan of Correction inspection

When making a Plan of Correction inspection, the Licensing Program Analyst must

- conduct the inspection within 10 working days after the Plan of Correction due date
- verify the condition of the correction, and
- document on the licensing report what was observed and whether it was acceptable.

Note: County licensing staff also must document verification of a correction on a licensing report during inspections.

Clearing the deficiency: Plan of Correction inspection

Upon determination that the deficiency has been corrected, the Licensing Program Analyst shall complete a Letter of Deficiency Citations Cleared.

Copies of the Letter of Deficiency Citations Cleared are

- provided to the facility representative along with the licensing report, and
 - placed in the facility file.
-

Continued on next page

3-3451: Making a Plan of Correction Inspection, Continued

**Clearing the
deficiency:
Plan of
Correction
inspection
(county staff)**

Upon determination that the deficiency has been corrected, county licensing staff shall compose a Deficiency is Cleared letter.

Copies of the Deficiency is Cleared letter are

- provided to the facility representative along with the licensing report, and
 - placed in the facility file.
-

3-3452: Holding an Office Meeting

What is an office meeting?

An **office meeting** is an in-person meeting between the Licensing Program Analyst and a licensee or administrator to review evidence of correction provided by the licensee as agreed in the licensee's Plan of Correction.

Requirements of an office meeting

When holding an office meeting, the Licensing Program Analyst must

- conduct the meeting no later than the Plan of Correction due date
- verify that the evidence of correction provided is acceptable to clear the deficiency, and
- document on the licensing report the outcome of the meeting.

Insufficient evidence

If the evidence of correction is deficient in any way, the Licensing Program Analyst (LPA) must take the following steps.

Step	Action
1	The LPA determines that the licensee has provided insufficient evidence that the deficiency has been corrected.
2	The LPA issues to the licensee an <i>Incomplete Proof of Correction Letter</i> . This may occur either at or subsequent to the office meeting.
3	If the due date originally established in the Plan of Correction (POC) cannot be met, the LPA may extend the POC due date. The extended due date is included in the Incomplete Proof of Correction Letter. For more information, see 3-3400: Plan of Correction.
4	The LPA must choose a method for verification that the deficiency has been corrected.
4A	Option 1: The licensee is required to provide additional information showing that the deficiency has been corrected.
4B	Option 2: The LPA decides to conduct a Plan of Correction inspection to verify correction.

Continued on next page

3-3452: Holding an Office Meeting, Continued

Exiting the meeting

Regardless of the outcome of the office meeting, copies of the updated licensing report are

- provided to the facility representative, and
 - placed in the facility file.
-

Clearing the deficiency: office meeting

Upon determination that the deficiency has been corrected, the Licensing Program Analyst shall complete a Letter of Deficiency Citations Cleared.

Copies of the Letter of Deficiency Citations Cleared are

- provided to the facility representative along with the licensing report, and
 - placed in the facility file.
-

Clearing the deficiency: office meeting (county staff)

Upon determination that the deficiency has been corrected, the county licensing staff shall compose a Deficiency is Cleared letter.

Copies of the Deficiency is Cleared letter are

- provided to the facility representative along with the licensing report, and
 - placed in the facility file.
-

Clearing the deficiency: letter examples

For examples of the Letter of Deficiency Citations Cleared and Deficiency is Cleared letter, see 3-3453: Submitting Proof of Correction.

3-3453: Submitting Proof of Correction

What is proof of correction?

Proof of correction is all agreed-upon evidence provided by the licensee that the Licensing Program Analyst will accept as verification that a deficiency has been corrected.

Accepting proof of correction

Verification of proof of correction by means other than an office meeting or Plan of Correction inspection is an option that may be used by a Licensing Program Analyst (LPA) to clear a deficiency.

Non-inspection/non-meeting proofs of correction are permitted under two circumstances, as shown in the table below.

When ...	Then ...
the Plan of Correction (POC) states that the deficiency will be corrected within a specified time frame and verification will be sent to the LPA before the POC due date	the licensee may provide proof of correction.
the licensee has been qualified to self-certify that the correction has been made	the licensee may provide proof of correction.
any situation exists, other than the two described above	a Plan of Correction inspection or office meeting is required for proof of correction.

Documenting proof of correction

In situations when it is permitted to verify proof of correction without a Plan of Correction inspection, the licensee or administrator must submit the stipulated evidence using a **Proof of Correction (LIC 9098)** form.

Continued on next page

3-3453: Submitting Proof of Correction, Continued

Proof of Correction (LIC 9098)

The **Proof of Correction (LIC 9098)** form is used by the licensee or administrator to certify under penalty of perjury that a correction has been completed.

The Licensing Program Analyst must provide the LIC 9098 to the facility representative during the exit conference only when self-certification is an acceptable means of demonstrating compliance.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY
PROOF OF CORRECTION
 CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
 COMMUNITY CARE LICENSING DIVISION
 CCLD Regional Office, 2525 NATOMAS PARK DRIVE
 SACRAMENTO, CA 95833

FACILITY NAME: SHADY ACRES SENIOR HOME FACILITY NUMBER: 193600132 LICENSING EVALUATOR: SUSAN JONES

This form shall be used in conjunction with the Licensing Report (LIC 809) and is provided to the facility to verify the correction of deficiency(ies) cited in a licensing visit to your facility on 06/17/2017. The use of this form will not prohibit the Licensing Evaluator from conducting follow-up visits to ensure that deficiencies are corrected. (See instructions on page 2).

DEFICIENCY(IES) SECTION NUMBER	PICTURE	RECEIPT	PHOTO- COPY	*CERTIFICATION	OTHER	DATE CORRECTED
1. 87705(c)(5)			✓			07/14/2017

Example notes: Proof of Correction (LIC 9098)

The table below explains items highlighted in the *Proof of Correction (LIC 9098)* graphic.

Item	Description
A: basics	The facility name, the facility number and the name of the Licensing Program Analyst.
B: inspection date	The date of the inspection report.
C: deficiencies	Each deficiency to be corrected is listed in this column by its specific statutory/regulatory reference (or Interim Licensing Standard), and in the order it appeared on the inspection report.

(1 of 2)

Continued on next page

3-3453: Submitting Proof of Correction, Continued

Example notes: Proof of Correction (LIC 9098), continued

The table below explains items highlighted in the *Proof of Correction (LIC 9098)* graphic.

Item	Description
D: picture	The licensee or administrator marks this box if the submitted proof is a photograph.
E: receipt	The licensee or administrator marks this box if the submitted proof is the printed receipt for an expenditure.
F: photocopy	The licensee or administrator marks this box if the submitted proof is a photocopy of records or other hard copy documents.
G: certification	For a self-certified correction, the licensee or administrator marks this box.
H: other	The licensee or administrator marks this box if the submitted proof is any type of evidence not otherwise provided for on this form.
I: date corrected	When the deficiency has been corrected, the date of the correction is entered in this space.

(2 of 2)

Completing the LIC 9098

When the Proof of Correction (LIC 9098) form is complete, the licensee or administrator must follow the steps in the table below.

Step	Action
1	The licensee or administrator must sign and date the form to certify that the corrections have been made as specified in the Plan of Correction (POC).
2	The licensee or administrator must mail or return the completed LIC 9098 form together with all proofs of correction listed on the form.
3	For each deficiency, the form and all proofs of correction must be returned by the POC due date. Note: If the POC specified different due dates for the correction of different deficiencies, then the licensee or administrator will probably need to send in multiple forms to achieve the due dates, and must be made aware of this by the Licensing Program Analyst during the exit interview.

Continued on next page

3-3453: Submitting Proof of Correction, Continued

Clearing the deficiency: proof of correction

For each deficiency, upon receipt of the requested proof of correction, the Licensing Program Analyst (LPA) must process clearing the deficiency using the following steps.

Step	Action
1	The LPA must analyze the provided proof of correction and determine whether the deficiency has been corrected according to the licensee's specific Plan of Correction. Note: When possible, minor questions regarding the completeness of the proof of correction can be handled over the telephone.
2	If the proof received is inadequate in any way, the LPA has the option of allowing the licensee to send in additional information to correct the deficiency. In this case, steps 2A and 2B should be taken.
2A	The licensee is sent notification that deficiencies have not been corrected and a copy of this notification is placed in the facility file.
2B	A due date extension may be given to the licensee, to allow them sufficient time to send in the additional information.
3	If the LPA has concerns about the credibility of the submitted proof, then a Plan of Correction inspection may be made to the facility to confirm that the correction has been made.
4	If the proof received is adequate, credible and timely, the LPA may accept the proof of correction and clear the deficiency.

Continued on next page

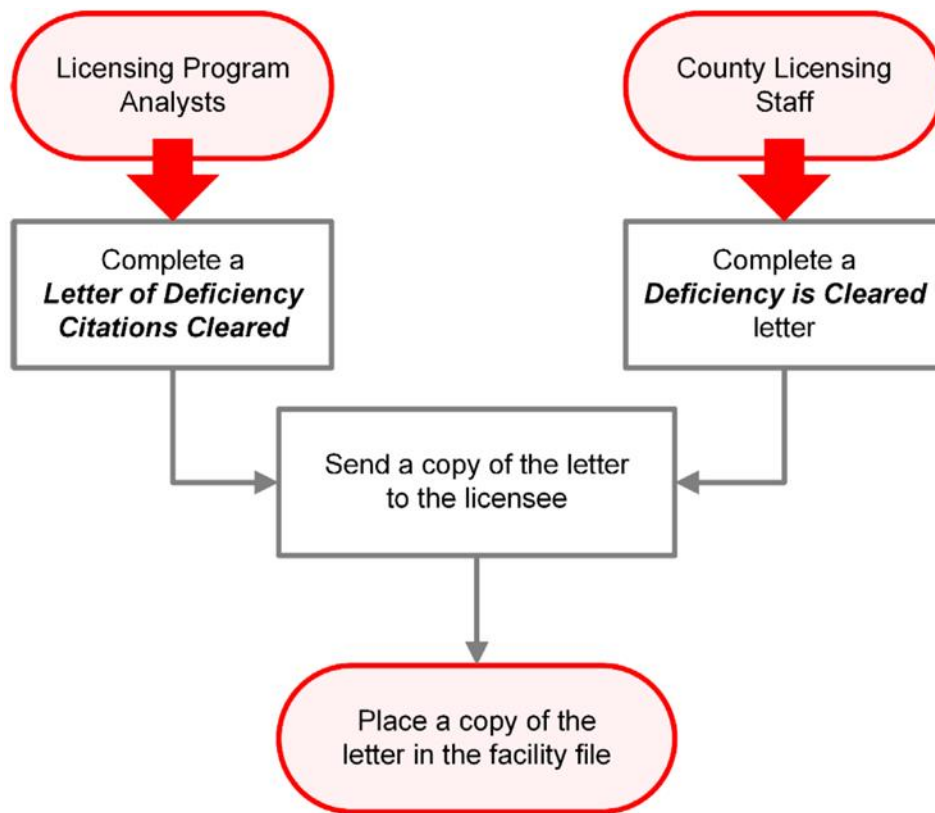
3-3453: Submitting Proof of Correction, Continued

Approving proof of correction

To approve and clear a Plan of Correction, the Licensing Program Analyst (LPA) must be convinced that the deficiency has been corrected.

Upon approval, the process of documentation and notification is slightly different for LPAs and county licensing staff, as shown in the graphic below.

Important! Under no circumstances should proof of correction be approved if there is doubt about whether a deficiency was corrected.



POC letter: state licensing staff

Licensing Program Analysts must communicate acknowledgement that deficiencies have been corrected by generating a **Letter of Deficiency Citations Cleared** (also referred to as a “Cleared POC Letter”) and sending a copy to the licensee. A copy of this letter is placed in the facility file.

Continued on next page

3-3453: Submitting Proof of Correction, Continued

Example:
Letter of
Deficiency
Citations
Cleared

The graphic below shows a Letter of Deficiency Citations Cleared. This template is available in the forms library.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION

CCLD Regional Office
2580 N. FIRST STREET, STE. 350
SAN JOSE, CA 95131

07/21/2017

SHADY ACRES SENIOR HOME
193600132
123 MAIN ST
SOMEWHERE, CA 95600

Letter of Deficiency Citations Cleared

Dear Licensee,

The following deficiencies, initially cited during a visit on 06/17/2017, have been cleared:

Section Cited: 87705(c)(5)	Date Due: 07/17/2017	E
Plan of Correction: Medical reappraisals done, copies of updated records provided	Corrections: cleared	
Clearance Date: 07/20/2017		

Example
notes: Letter
of Deficiency
Citations
Cleared

The table below describes items highlighted in the Letter of Deficiency Citations Cleared graphic.

Item	Description
A: return address	The Licensing Program Analyst's office.
B: date	The date of the letter.
C: facility address	The name, number, and address of the facility.
D: inspection date	The date of the licensing inspection from the inspection report.
E: details	For each deficiency cleared in the letter: the section cited, correction due date, correction made, status of <i>cleared</i> , and the date the deficiency was cleared.

Continued on next page

3-3453: Submitting Proof of Correction, Continued

POC letter: County licensing staff must communicate acknowledgement that deficiencies have been corrected by sending a **Deficiency is Cleared** letter to the licensee. A copy is placed in the facility file.

Example: The sample letter below is an example of how a Deficiency is Cleared letter should be composed.

Deficiency is Cleared letter

DEFICIENCY IS CLEARED

July 21, 2017

SHADY ACRES SENIOR HOME
123 MAIN ST
SOMEWHERE, CA 95600

Facility Number: 193600132 Licensing Report Date: 06/17/2017

Dear Licensee:

This is to confirm that your Proof of Correction (LIC 9098) or other verification with necessary documentation has been received and approved. The following deficiencies are cleared:

87705(c)(5) Delinquent medical reappraisals of persons in care brought up to date.

← all deficiencies cleared by this letter are listed here

If you have any questions, please contact me.

Sincerely,

[Signature and Title] *[Phone Number]*

← disclaimer notice included as applicable by facility type

NOTICE: Child Care Centers and Family Child Care Homes

If this document reflects proof of correction for a Type A violation, you must post this document for 30 days. Family Child Care Homes shall comply during the hours children are in care.

3-3454: Self-Certification

What is self-certification?

Self-certification is a method allowing a licensee or administrator to attest that corrections have been made. It is an option permitted only under specific circumstances.

When is self-certification permitted?

Self-certification of corrected deficiencies is only permitted when **both** of the following conditions are met:

Condition #1

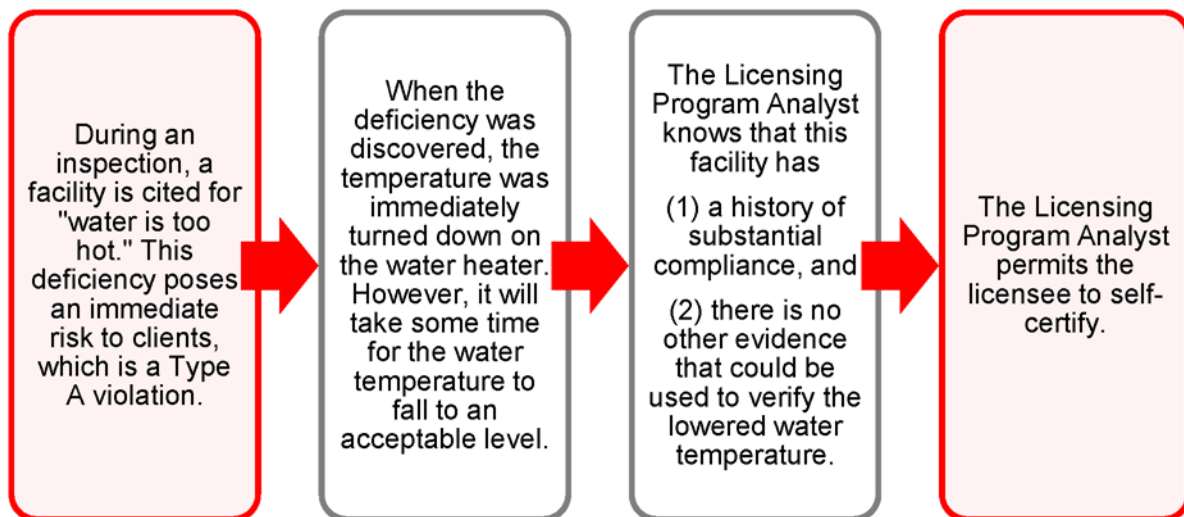
The facility must have a history of substantial compliance.

Condition #2

There must be no other verifiable evidence that could be submitted to prove that the deficiency has been corrected.

Example: self-certification

The graphic below describes a situation where a Licensing Program Analyst could allow self-certification of a deficiency.



Continued on next page

3-3454: Self-Certification, Continued

**Example
notes: self-
certification**

In the self-certification graphic, the licensee would self-certify by reporting back to the Licensing Program Analyst that the facility had

- tested the water temperature once the lowered temperature had stabilized, and
- obtained an acceptable new temperature reading (the new reading should be included as part of the proof).

**Self-
certification of
Type A
violations**

Important! The use of self-certification for Type A violations should be carefully considered. The Licensing Program Analyst must consult with their Licensing Program Manager before allowing self-certification for correction of this type of deficiency.

3-3455: Inadequate Correction and Further Action

Addressing inadequate correction

When adequate proof of correction is not provided by the Plan of Correction (POC) due date, the result will be one or more of the following actions:

- notification to the licensee that deficiencies have not been cleared
- a POC inspection of the facility, and/or
- applicable assessment of civil penalties, if appropriate.

Important! Foster Family Homes are exempt from civil penalty assessments when a deficiency is not corrected.

Notifying the licensee

When a licensee must be notified that they have either missed a due date for correction, or submitted insufficient proof of correction, the Licensing Program Analyst will send the licensee an **Incomplete Proof of Correction** letter, composed on Department letterhead.

Continued on next page

3-3455: Inadequate Correction and Further Action, Continued

**Example:
incomplete
proof of
correction**

The graphic below shows an Incomplete Proof of Correction letter composed on Department letterhead.

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office
1000 CORPORATE CNTR DR. 200-B
MONTEREY PARK, CA 91754

WILL LIGHTBOURNE
DIRECTOR

EDMUND G. BROWN JR.
GOVERNOR

July 21, 2017

L'I'L PUNKINS CHILD CARE CENTER
456 MAIN ST
SOMEWHERE, CA 95600

Facility Number: 193600123 Licensing Report Date: 06/17/2017

Dear Licensee:

Verification either was not received or was inadequate to substantiate that the deficiency cited on the Licensing Report was corrected. You need to provide the following additional documentation/information: **deficiencies not cleared are listed here**

101220.1(g) The licensee shall document each child's immunizations and shall maintain such documentation in the center for as long as the child is enrolled.

Please return a copy of this letter and your documentary evidence of correction no later than 07/31/2017. Failure to provide adequate proof of correction by this date will result in assessment of civil penalties.

If you have any questions, please contact me.

Sincerely,
[Signature and Title] [Phone Number]

NOTICE: Child Care Centers and Family Child Care Homes
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disclaimer notice included as applicable by facility type

Continued on next page

3-3455: Inadequate Correction and Further Action, Continued

Authority: civil penalties

Authority for the assessment of civil penalties when a deficiency is not corrected by the determined due date is referenced in the California Code of Regulations, Title 22, Division 6. The table below lists sections where this authority is described.

Chapter	Section Number
1. General Licensing Requirements	§ 80054
3. Adult Day Programs	§ 82054
8. Residential Care Facilities for the Elderly (RCFE)	§ 87761
8.5 Residential Care Facilities for the Chronically Ill	§ 87854

Authority: civil penalties, Child Care Centers

Authority for the assessment of civil penalties when a deficiency is not corrected by the determined due date is referenced in the **California Code of Regulations, Title 22, Division 12**. The table below shows the section where this authority is described.

Chapter	Section Number
1. Child Care Center General Licensing Requirements	§ 101195
3. Family Day Care Homes for Children	§ 102395

Continued on next page

3-3455: Inadequate Correction and Further Action, Continued

Authority: civil penalties, Health and Safety Code

Authority for the assessment of civil penalties when a deficiency is not corrected by the determined due date is referenced in **Division 2** of the **Health and Safety Code**. The table below shows sections where this authority is described.

Chapter	Section Number
3. California Community Care Facilities Act	§ 1548.
3.01. Residential Care Facilities for Persons With Chronic Life-Threatening Illness	§ 1568.0822
3.2. Residential Care Facilities for the Elderly	§ 1569.49.
3.4. California Child Day Care Act	§ 1596.893b.
